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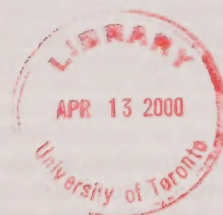
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**Legislative Assembly  
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de l'Ontario**Première session, 37<sup>e</sup> législature**Official Report  
of Debates  
(Hansard)****Journal  
des débats  
(Hansard)****Monday 3 April 2000****Lundi 3 avril 2000**Speaker  
Honourable Gary CarrPrésident  
L'honorable Gary CarrClerk  
Claude L. DesRosiersGreffier  
Claude L. DesRosiers



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## LEGISLATIVE ASSEMBLY OF ONTARIO

Monday 3 April 2000

## ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Lundi 3 avril 2000

*The House met at 1330.  
Prayers.*

### MEMBERS' STATEMENTS

#### ONTARIANS WITH DISABILITIES LEGISLATION

**The Speaker (Hon Gary Carr):** Welcome back, everyone. Members' statements.

**Mr Steve Peters (Elgin-Middlesex-London):** This government has failed 1.5 million persons with disabilities in this province. Loud and clear, over and over, that's the message I heard as I travelled the province during the month of March and met with over 1,500 groups and individuals.

Disabled persons face access barriers, barriers to education, transportation, the health care system. Even the government's very own ODSP program prevents these individuals from reaching their full potential. They are not looking for handouts; they are demanding a level playing field.

There is still no Ontarians with Disabilities Act despite repeated promises, three ministers and one pathetic attempt at legislation. There is, however, a string of broken promises by this government, not the least of which is the promise of open consultations. The former minister held closed-door, invitation-only consultations, as is the current minister, who even refuses to define her ever-illusive action plan.

I believe it is my responsibility to meet in person, in the open, with those who would be most affected. The results will be made public and provided to the Premier and the minister responsible.

On November 23, this House unanimously supported my resolution calling for the passage of legislation within two years. As this Legislature sits for the first time in the 21st century, I urge the government to take responsibility for the promises, to truly listen and to work co-operatively to pass a strong and effective Ontarians with Disabilities Act.

#### COMMUNITY SAFETY

**Mr John O'Toole (Durham):** It's a pleasure to be back.

I'm pleased to rise today in the House and talk about community safety. Last Monday night, the Newcastle

Ratepayers Association and I hosted a public forum to share information and hear from residents on how they want to make their communities safer places to live. People from across my riding of Durham spoke to the audience about how they became involved in their communities and the effective programs in their area. There were many promising stories told.

I would like to congratulate the presenters and tell you that they were Fred Ford of the Cartwright Youth Activity Centre, Dominic Vetere of Dom's Auto Parts, inspectors Ross Smith and Chuck Mercier, Scugog councillor Ken Gadsden for the Scugog Road Watch program, April Dubreuil of the Firehouse Youth Group in Bowmanville, David Rickard of the Newcastle Ratepayers Association, Ron Hooper of the Bowmanville BIA, Barry Walters of the Newcastle BIA, and Nicole Johnson and Marianne Winters from the Neighbourhood Watch groups in Newcastle and Orono. They spoke of successful programs to take back their communities.

I also want to thank Gerry Martiniuk, co-chair of the Ontario Crime Control Commission, for speaking to my constituents about the steps our government is taking to help strengthen community safety.

I applaud the initiatives being taken by the people of Newcastle and encourage all members to participate in taking back our communities and having community safety and crime prevention as a top priority.

#### EMPLOYMENT PRACTICES

**Mrs Sandra Pupatello (Windsor West):** I wrote to the Premier last week to ask his opinion on attaching homing devices to employees, like Andersen Consulting is now doing to social service employees. We don't agree with this policy, but I want to hear what the Premier has to say, because I would like him to volunteer to be the first recipient of such a homing device. Unfortunately, I don't know that the gadget would actually register when the Premier is out of the province, which he has been most of the time, and then Andersen Consulting would have to fire him for never being here.

Then maybe we could attach the homing device to the individual who is now running for the federal party, also out of the province most of the time, and therefore the device also would not register, and Andersen Consulting would have to fire him too. We could go right through the entire cabinet and we would have virtually no one left in cabinet. The truth is, do we really want to do this to the people of Ontario who serve in the public service? It's completely inappropriate.



To date, I have not heard back from the Premier to suggest that he agrees or disagrees. This speaks to the fact that the privatization of that contract with Andersen Consulting, which we have said from the beginning is a boondoggle that takes money from the taxpayers in a very inappropriate manner, the whole notion of Andersen Consulting doing this—it's likely that the Premier didn't know about it in the first place.

Once again, I support Erik Peters in calling for a complete abolition of that contract.

#### AGRICULTURE INDUSTRY

**Mr Bert Johnson (Perth-Middlesex):** I rise in the Legislature today to recognize the contribution of agriculture in my riding of Perth-Middlesex. Two weeks ago, the Perth County Federation of Agriculture released a report that indicates that agriculture generates over \$1 billion in annual sales and employs 29%, nearly one third, of Perth county's workforce. The report also highlights the fact that the agricultural sector has links with almost every sector of the Perth county economy and touches an estimated 686 businesses.

The report also shows that Perth county is among the top five agricultural producers in Ontario. It is also significant that Perth county ranks seventh among Canadian provinces in terms of farm gate sales, ranking ahead of Nova Scotia, PEI, New Brunswick and Newfoundland.

I want to commend the farmers of Perth county and the thousands of residents who are directly and indirectly involved with the agricultural industry. I also want to applaud the efforts of my colleague, the Minister of Agriculture, Food and Rural Affairs, who continues to work on behalf of the Ontario farmers.

Mr Speaker, I hope that you and other members of the Legislature will join with me today to celebrate the accomplishments of the agriculture industry in Perth county.

#### BREAST CANCER

**Ms Caroline Di Cocco (Sarnia-Lambton):** In speaking with Lawrence and Kay Greenaway, the founders of the Breast Cancer Society of Canada, I've learned some disturbing facts regarding the screening process for breast cancer. According to recent data, 60% of the mammography machines in Ontario are not accredited by the Canadian Association of Radiologists. This means that the technicians using the machine do not require specialized training. As well, a mammography machine that is not accredited is not subject to the quality control for accurate amount of radiation and quality of film.

This is alarming because it brings into question the accuracy of the testing for early diagnosis of breast cancer. In the United States, by law, every mammography facility requires mandatory certification. Dalton McGuinty and the Liberal caucus believe that all mammography machines in Ontario must be accredited.

Prevention and early detection are the key to lower breast cancer mortality rates. It is not acceptable that 60% of mammography machines in this province are not subject to strict quality control.

Unfortunately, the Minister of Health will not even meet with the founders of the Breast Cancer Society of Canada to discuss this. I ask that the Harris government take responsibility, stop blaming others and address this matter.

1340

#### OPP BEAR HUG BAND

**Mr R. Gary Stewart (Peterborough):** I rise today to recognize a successful group of police officers and community policing volunteers who promote children's and seniors' safety programs by performing at community events and children's concerts throughout the province. The name: the OPP Bear Hug Band.

The OPP bear hug safety program was developed by OPP Sergeant Gord Magee in 1988. Over the years, they have been featured at benefit dances, community concerts, Canada Day festivities, rural events and many major events. This band is well received by everyone who has had an opportunity to hear them. They combine well-loved and known music—by singing, clapping and dancing—with important safety messages from a variety of services such as fire departments, ambulance services, police services and Ontario Hydro.

The popularity of the Bear Hug Band is skyrocketing. They are booked up for months in advance and are even accepting bookings from out of our province and country. I was very pleased to recently learn that the Bear Hug Band will be travelling to the Netherlands from May 1 to 9. They have been invited to attend the Remembrance Day services held in Grosbeek.

I commend the OPP Bear Hug Band for the hours of personal dedication and time they have put into every successful venture. As members of this assembly, let us join together to thank and salute the OPP Bear Hug Band for their work as they promote safety.

#### PRIVATE UNIVERSITIES

**Mrs Marie Bountrogianni (Hamilton Mountain):** It's very clear that this government is about to open its arms to private universities, both Canadian- and US-based. The government spin masters will try to convince Ontarians that this is a good thing; they're good at that. The government will say that these universities will operate at no cost to the Ontario taxpayer. The reality is that private universities cost the taxpayers millions of dollars a year in the US and they will do the same thing in Ontario. For example, 17% of Harvard's annual income comes from government grants and contracts. Private colleges in Ontario already use the OSAP system that is paid for by taxpayers' money.

The government will say that by introducing private universities, the double cohort enrolment crisis will be



solved. The reality is that the types of for-profit, private universities the government is considering offer niche programming at exorbitant prices. They will not provide spaces for the 80,000 18- to 24-year-olds who will be seeking a proper university degree, not a niche program.

The big issue is that the Harris government to date shows no real interest in planning for the tremendous challenges our universities face. For example, the Super-Build was a super bust, and I look forward to exposing the myths in the weeks to come.

### MUNICIPAL RESTRUCTURING

**Mr David Christopherson (Hamilton West):** I rise today to call on the Minister of Municipal Affairs to do three things with regard to the question of Flamborough being a part of the future new city of Hamilton.

One, he make an immediate decision. There is absolutely no need for the minister to delay or drag this out any further.

Secondly, I call on the minister to reject partitioning of Flamborough from the new city of Hamilton outright, given the fact that of the four conditions he set out, two have not been met. The region of Halton has rejected accepting part of Flamborough, and the minister had laid out that he wanted all of the municipalities that would receive any part of Flamborough to be on side. One of the key players is obviously not on side. Second, the minister set out that the transition board of the new city of Hamilton would have to agree to the financial assumptions that are underlying Flamborough's bid, and of course they do not. In fact, the discrepancy is huge, in terms of tens of millions of dollars.

Lastly, I call on the minister to make this decision, not only immediately in light of the decisions that have been made by the transition board and Halton, but that it be binding and final. We don't need this question of whether Flamborough is in or out of Hamilton hanging over us for months or years to come.

Minister, make the decision, make it immediately, and make it that Flamborough will be part of the great new city of Hamilton.

### ATTENDANCE OF MINISTER

**Mr Raminder Gill (Bramalea-Gore-Malton-Springdale):** The Liberal member for Toronto Centre-Rosedale and critic for science and technology says it is important for members of the Legislature to take the opportunity during question period to challenge the Premier and the government on its record.

He cares so much about question period that he had his staff—the Liberal caucus staff and the legislative research staff—conduct a study on how often the Premier attends question period so that he could raise important questions.

He cares so much that he has planned to introduce a private member's bill to dock the pay of the ministers who fail to appear in this Legislature as often as the

member for Toronto Centre-Rosedale would like them to show up.

Well, I thought I would do my own quick study using the Internet access available to us by the assembly. In my quick study I found that the Liberal member for Toronto Centre-Rosedale has only asked five questions in his time at Queen's Park—that's right, only five questions. The member for Toronto Centre-Rosedale serves as his party's science and technology critic. How many of his five questions have been directed to the Minister of Energy, Science and Technology? How often has he used the opportunity afforded to him by question period to advance the issues in his critic portfolio? The answer is, not once. Never has the Liberal critic for science and technology raised a question in this chamber pertaining to issues in his portfolio. Perhaps if he spent less time grandstanding and more time—

**The Speaker (Hon Gary Carr):** Order. I'm afraid the member's time is up. Just so the members know, the second go-round in this session will be a little bit quicker on the time. I apologize, but we need to do that to keep things running smoothly.

**Mr Dalton McGuinty (Leader of the Opposition):** Mr Speaker, on a point of order: I seek the unanimous consent of this House to move and immediately pass the following motion:

Be it resolved that, in the opinion of this House—

**Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader):** Mr Speaker, on a point of order: He can ask for unanimous consent to introduce a motion about a subject, but he cannot read the motion.

**The Speaker:** The government House leader is correct. He has to ask for unanimous consent first and, if he gets it, then he can proceed with the motion.

The member has asked for unanimous consent. He needs to indicate what the subject matter is, so I will let the leader of the official opposition proceed.

**Mr McGuinty:** The motion is, among other things, to condemn the federal government for insufficiently funding health care in Ontario.

**The Speaker:** Is there unanimous consent? I'm afraid I heard some noes.

**Ms Marilyn Churley (Broadview-Greenwood):** Mr Speaker, on a point of order: Actually, I don't know if we're finished with this item. I have a unanimous consent request as well. May I rise now to seek unanimous consent for this House to support a motion on the PCB shipments that may be coming into Ontario? Very short.

**The Speaker:** The member has asked for unanimous consent? Is there unanimous consent? I'm afraid I heard some noes.

### RESIGNATION OF MEMBER FOR WENTWORTH-BURLINGTON

**The Speaker (Hon Gary Carr):** I beg to inform the House that a vacancy has occurred in the membership of the House by reason of the resignation of Toni Skarica,



member for the electoral district of Wentworth-Burlington. Accordingly, my warrant has been issued to the chief election officer for the issue of a writ for a by-election.

**Mr Sean G. Conway (Renfrew-Nipissing-Pembroke):** Just on that point, if I might, I read in the press that one of our colleagues—

**The Speaker:** Just a second. Is it a point of order? I will say in the beginning that in the last session we were all very new, including the Speaker, and on points of order I tended to let things go a little bit because I took points of order very seriously. I must say that as a result of my indulgence, on a lot of occasions points of order were used for debate. I will tell you, in this session there are no more rookies here, including the Speaker, although some days you may think so. We are going to be a little bit tighter. If I do not see a legitimate point of order very early, I will be up. I wanted to explain that to all the members.

1350

**Mr Conway:** Well said, Mr Speaker.

On a point of order, Mr Speaker: I'm certainly no rookie, but I noticed in the papers today that one of our colleagues, and it's not an everyday event, intends apparently to seek the leadership of a national political party. My question to you is very technical. In the event that such a declaration is made, does that occasion a vacancy in a provincial seat such as the one he might hold here?

**The Speaker:** It's not a point of order, and the Speaker doesn't answer questions like that.

### INSCRIPTIONS IN CHAMBER

**The Speaker (Hon Gary Carr):** I just want to take a quick moment, before we begin, to invite all the members to look to my left. As you know, this House has a tradition of having Latin inscriptions in the chamber. We have on the other side, which is just below the press gallery, "Dare to be wise"; "By teaching we learn." "Let us be viewed by our actions" is on the right-hand side, and this is advice we all should from time to time listen to.

In 1893, when the building was opened, two of the pillars to my left, the immediate left that you see there now, did not have any inscription. As a result of the year 2000, we asked the members of the 37th Parliament to assist in choosing the appropriate models to put inscriptions to my left. The models you decided on have been carved by Sigi Buhler, who is seated in the Speaker's gallery today. Originally from Switzerland, Mr Buhler now lives in Toronto. He completed the work on March 8, 2000.

I'm sure all the members will agree that we are fortunate to have such a talented craftsman to work so closely in putting together our new inscriptions. It is with the most complimentary intent that I say these carvings look as if they have been here in the chamber from the beginning. I guess that is one of the best forms of a

compliment, to be able to say it looks like it has always been there.

The inscriptions to my left: There is immediately to the left the crown, flanked by two angels, one holding a scroll and the other a bunch of grapes, with an inscription roughly translated to mean "Good government bears fruit." The second pillar, a little farther along, is flanked by two angels, one holding an olive branch and one an hourglass. The new inscription in Latin translates into "Let there be peace in our time."

I want to take this opportunity to thank, on behalf of all the members and all the people of Ontario, Sigi Buhler for assisting, and we wish him very much success, with his excellent work in our chamber here today. Hopefully, the members will give him a sign by rising and clapping and thanking him for his efforts.

### REPORTS BY COMMITTEES

#### STANDING COMMITTEE ON GOVERNMENT AGENCIES

**The Speaker (Hon Gary Carr):** I beg leave to inform the House that during the recess the Clerk received the second, third and fourth reports of the standing committee on government agencies.

Pursuant to standing order 106(e)9, these reports are deemed to have been adopted by the House.

#### STANDING COMMITTEE ON JUSTICE AND SOCIAL POLICY

**Mr Joseph N. Tascona (Barrie-Simcoe-Bradford):** I beg leave to present a report from the standing committee on justice and social policy and move its adoption.

**Clerk at the Table (Ms Lisa Freedman):** Mr Tascona from the standing committee on justice and social policy presents the committee's report and moves its adoption as follows:

Your committee begs to report the following bill as amended:

Bill 31, An Act, in memory of Christopher Stephenson, to establish and maintain a registry of sex offenders to protect children and communities / *Projet de loi 31, Loi à la mémoire de Christopher Stephenson visant à créer et à tenir un registre des délinquants sexuels en vue de protéger les enfants et les collectivités.*

**The Speaker:** Shall the report be received and adopted? Agreed. This bill is therefore ordered for third reading.

#### STANDING COMMITTEE ON FINANCE AND ECONOMIC AFFAIRS

**Mr Marcel Beaubien (Lambton-Kent-Middlesex):** I beg leave to present a report on pre-budget consultation 2000 from the standing committee on finance and eco-



nomic affairs and move the adoption of its recommendations.

**The Speaker:** Does the member wish to make a brief statement?

**Mr Beaubien:** Thank you very much for the opportunity to thank not only the staff but the committee members. I would also like to thank the presenters who presented to the committee across the province. I would also urge all the members of the House to read the report so that we can have a friendly, balanced debate when the budget is presented. With these brief comments, Mr Speaker, I would like to adjourn the debate.

**The Speaker:** Is it the pleasure of the House that the motion carry? Carried.

#### STANDING COMMITTEE ON GENERAL GOVERNMENT

**Ms Marilyn Mushinski (Scarborough Centre):** I beg leave to present a report from the standing committee on general government and move its adoption.

**Clerk at the Table (Ms Lisa Freedman):** Mrs Mushinski from the standing committee on general government presents the committee's report and moves its adoption as follows:

Your committee begs to report the following bill without amendment:

Bill 37, An Act to amend the Collection Agencies Act / Projet de loi 37, Loi modifiant la Loi sur les agences de recouvrement.

**The Speaker (Hon Gary Carr):** Shall the report be received and adopted? Agreed.

The bill is therefore ordered for third reading.

#### COMMISSIONERS OF ESTATE BILLS

**The Speaker (Hon Gary Carr):** I beg to inform the House that the Clerk has received a favourable report from the Commissioners of Estate Bills with respect to Pr5, An Act respecting The Ross Memorial Hospital.

Accordingly, pursuant to standing order 86(e), the bill and the report stand referred to the standing committee on regulations and private bills.

#### INTRODUCTION OF BILLS

##### AN ACT TO REPEAL THE SAFE STREETS ACT

##### UNE LOI POUR RÉVOQUER LA LOI SUR LA SÉCURITÉ DANS LES RUES

Mr Kormos moved first reading of the following bill:

Bill 51, An Act to Repeal the Safe Streets Act, 1999 (Nouveaux Misérables Act), 2000 / Projet de loi 51, Une loi pour révoquer la Loi de 1999 sur la sécurité dans les rues (La Loi sur les nouveaux Misérables), 2000.

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry?

All those in favour of the motion will please say "aye."

All those opposed will please say "nay."

In my opinion, the ayes have it.

The motion is carried.

Does the member have some comments?

**Mr Peter Kormos (Niagara Centre):** I certainly do, Speaker. This bill repeals the so-called Safe Streets Act, 1999. The Safe Streets Act was poorly conceived legislation that persecutes the poor, these nouveaux Misérables, while leaving charities incredibly vulnerable. This so-called Safe Streets Act has created danger for firefighters, students, any number of good-minded people who want to start raising funds on our streets. This—

**The Speaker:** In the introduction of bills, the statements would be short; in this session as well, we will try to remain short. Would the member please sum up quickly.

**Mr Kormos:** I'll be brief, Speaker. This government bill has endangered the future of charitable organizations by making it illegal to solicit money on streets, in parking lots, at transit stops or near bank machines, causing charities to lose precious fundraising opportunities and risking the safety and security of thousands of good-minded volunteers.

**The Speaker:** I thank the member.

1400

#### PETROLEUM PRODUCTS PRICE FREEZE ACT, 2000

##### LOI DE 2000 SUR LE GEL DU PRIX DE CERTAINS PRODUITS PÉTROLIERS

Mr Bartolucci moved first reading of the following bill:

Bill 52, An Act to provide for an interim freeze in the price of certain petroleum products / Projet de loi 52, Loi prévoyant le gel provisoire du prix de certains produits pétroliers.

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry? Carried.

The member for a short statement.

**Mr Rick Bartolucci (Sudbury):** This bill freezes the price of petroleum products at the price of those products on February 14, 1999. The freeze applies from the day the bill comes into force and lasts for 90 days. If the Legislative Assembly is not sitting when the freeze ends, the minister may make an order extending the freeze for another 60 days. This will allow truck drivers, independent operators, to stay in business, and the consumer to feel the Ontario government is treating them fairly.

## CARE HOMES ACT, 2000

## LOI DE 2000

## SUR LES MAISONS DE SOINS

Mrs McLeod moved first reading of the following bill:

Bill 53, An Act to provide for the accreditation of care homes, to protect the rights of tenants and to amend the Tenant Protection Act, 1997 / Projet de loi 53, Loi prévoyant l'agrément de maisons de soins, protégeant les droits des locataires et modifiant la Loi de 1997 sur la protection des locataires.

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry? Carried.

The member for a short statement.

**Mrs Lyn McLeod (Thunder Bay-Atikokan):** Very briefly, the purpose of the bill is to put in place a bill of rights for tenants of care homes and to establish a care homes review board which is empowered to investigate complaints and to enforce the bill of rights. The bill also provides for the creation of an annually updated registry of care homes.

# AN ACT TO REQUIRE THE REGULAR ATTENDANCE OF THE PREMIER AND CABINET IN QUESTION PERIOD

Mr Smitherman moved first reading of the following bill:

An Act to require the regular attendance of the Premier and Cabinet in question period.

**Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader):** On a point of order, Mr Speaker: This particular bill is clearly out of order and attacks the privileges of members of this House. I therefore ask you to consider not calling the first vote on this, as the title clearly indicates that this is dealing with the absence of members of this House at a particular time.

On December 21, you chastised this very member for calling attention to the absence of the Premier at that time. Your words were, "I've asked all members—"

*Interjections.*

**The Speaker (Hon Gary Carr):** Order. I do need to hear the point of order, and I would like to hear the member speaking. I would ask all the members to please be quiet during the point of order. If the member could wrap up pretty quickly on the point of order, please.

**Hon Mr Sterling:** Yes, I will. The member opposite has already shared this bill with the public and many members of the government House. It's clear to us that this bill is contrary to the standing orders and the practices of this House.

You said on December 21, Mr Speaker, to this very member:

"I've asked all members very clearly on occasion not to do this"—that is, comment on the absence of the Premier—"and they continue to do it. This is the last warning to everybody. I will not put up with anybody

breaking the standing orders: Last warning to everybody in this House. If they do it again, they will be named."

**The Speaker:** I want to thank the member on the point of order. That was during the question period, and at any other point in time—the standing orders are very clear—not on the introduction of a bill. I'm going to allow this to be introduced.

Is it the pleasure of the House that the motion carry?

All those in favour of the motion will please say "aye."

All those opposed will please say "nay."

In my opinion, the nays have it.

Call in the members. This will be a five-minute bell.

*The division bells rang from 1404 to 1409.*

**The Speaker:** Mr Smitherman has moved An Act to require the regular attendance of the Premier and the Cabinet in question period. All those in favour of the motion will please rise.

## Ayes

Agostino, Dominic	Crozier, Bruce	Levac, David
Bartolucci, Rick	Curling, Alvin	Marchese, Rosario
Bountrogianni, Marie	Di Cocco, Caroline	Martel, Shelley
Boyer, Claudette	Dombrowsky, Leona	McGuinty, Dalton
Bradley, James J.	Duncan, Dwight	McLeod, Lyn
Brown, Michael A.	Gerretsen, John	Parsons, Ernie
Bryant, Michael	Gravelle, Michael	Patten, Richard
Caplan, David	Hampton, Howard	Peters, Steve
Christopherson, David	Hoy, Pat	Phillips, Gerry
Churley, Marilyn	Kennedy, Gerard	Pupatello, Sandra
Cleary, John C.	Kormos, Peter	Ruprecht, Tony
Colle, Mike	Kwinter, Monte	Sergio, Mario
Conway, Sean G.	Lalonde, Jean-Marc	Smitherman, George
Cordiano, Joseph	Lankin, Frances	

**The Speaker:** All those opposed to the motion will please rise and be recognized by the Clerk.

## Nays

Arnott, Ted	Hodgson, Chris	Palladini, Al
Baird, John R.	Hudak, Tim	Runciman, Robert W.
Beaubien, Marcel	Jackson, Cameron	Sampson, Rob
Chudleigh, Ted	Johns, Helen	Snobelen, John
Clark, Brad	Johnson, Bert	Spina, Joseph
Clement, Tony	Kells, Morley	Sterling, Norman W.
Coburn, Brian	Klees, Frank	Stewart, R. Gary
Cunningham, Dianne	Mariand, Margaret	Stockwell, Chris
Dunlop, Garfield	Maves, Bart	Tascona, Joseph N.
Ecker, Janet	Mazzilli, Frank	Tilson, David
Elliott, Brenda	Molinari, Tina R.	Tsubouchi, David H.
Eves, Ernie L.	Munro, Julia	Turnbull, David
Flaherty, Jim	Mushinski, Marilyn	Wettlaufer, Wayne
Galt, Doug	Newman, Dan	Witmer, Elizabeth
Gill, Raminder	O'Toole, John	Wood, Bob
Hardeman, Ernie	Ouellette, Jerry J.	Young, David
Hastings, John		

**Clerk of the House (Mr Claude L. DesRosiers):** The ayes are 41; the nays are 49.

**The Speaker:** I declare the motion defeated.



FUNERAL DIRECTORS  
AND ESTABLISHMENTS  
AMENDMENT ACT  
(FUNERAL SERVICES), 2000

LOI DE 2000 MODIFIANT  
LA LOI SUR LES DIRECTEURS  
DE SERVICES FUNÉRAIRES  
ET LES ÉTABLISSEMENTS FUNÉRAIRES  
(SERVICES FUNÉRAIRES)

Mr Sergio moved first reading of the following bill:

Bill 54, An Act to amend the Funeral Directors and Establishments Act with respect to funeral services /  
Projet de loi 54, Loi modifiant la Loi sur les directeurs de services funéraires et les établissements funéraires à l'égard des services funéraires.

*Interjections.*

**The Speaker (Hon Gary Carr):** Order. There is a point of order. All members will remember to get to the point quickly, because I will have to cut them off if it's not a point of order.

**Mr Dalton McGuinty (Leader of the Opposition):** Speaker, it is my understanding that the rules of the standing orders to provide that no strangers are entitled to enter on to the floor of the House.

*Interjections.*

**The Speaker:** Order. That is not a point of order.

Mr Sergio moves that leave be given to introduce a bill entitled An Act to amend the Funeral Directors and Establishments Act with respect to funeral services.

Is it the pleasure of the House that the motion carry? Carried.

The member for a short statement.

**Mr Mario Sergio (York West):** I didn't know that my introduction of the bill prompted the Premier to attend today.

I'll keep it very short. I think this crystallizes the act as it is presently defined. This will allow only a licensed funeral establishment, cemetery or crematorium to indeed conduct rites for that particular use.

**Mr Mike Colle (Eglinton-Lawrence):** On a point of order, Mr Speaker: In light of the extraordinary hardship that escalating gasoline prices are causing Ontarians, I move that we proceed to second reading to accelerate debate on the member for Sudbury's Petroleum Products Price Freeze Act, so we can help Ontarians.

**The Speaker:** You first have to ask for unanimous consent. Is that what you're asking for?

Is there unanimous consent? I'm afraid I heard some noes.

## MOTIONS

### PRIVATE MEMBERS' PUBLIC BUSINESS

**Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader):** Mr

Speaker, I believe I have unanimous consent to move a motion without notice regarding the order of precedence for private members' public business.

**The Speaker (Hon Gary Carr):** Is there unanimous consent? Agreed.

**Hon Mr Sterling:** I move that, notwithstanding standing order 96(d), the following change be made to the ballot list for private members' public business: Mr Arnott, Mr Murdoch and Ms Molinari exchange places in order of precedence such that Mr Arnott assumes ballot item number 16, Mr Murdoch assumes ballot item number 22 and Ms Molinari assumes ballot item number 41, and that Mr Patten and Mr Agostino exchange places in order of precedence such that Mr Patten assumes ballot item number 30 and Mr Agostino assumes ballot item number 15.

**The Speaker:** The government House leader has moved that notwithstanding standing order 96(d)—

**Interjection:** Dispense.

**The Speaker:** Dispense. All those in favour of the motion? Agreed. The motion is carried.

**Hon Mr Sterling:** Mr Speaker, I seek unanimous consent to put forward a motion without notice regarding private members' public business.

**The Speaker:** Is there unanimous consent? Agreed.

**Hon Mr Sterling:** I move that, notwithstanding standing order 96(g), the requirement for notice be waived with respect to ballot items 15 and 16.

**The Speaker:** Is it the pleasure of the House that the motion carry? Carried.

## STATEMENTS BY THE MINISTRY AND REPSONSES

### HEALTH CARE REFORM

**Hon Michael D. Harris (Premier):** I rise in the House today to speak to the urgent need for the federal government not only to restore its cuts to health funding but also to provide predictable, stable, long-term funding so that Ontario and the other provinces can continue the work of reforming our health care system.

The status quo isn't good enough. That's why the Ontario government has already embarked on an ambitious reform agenda contained in our health action plan. The goal of our reform agenda for health care is to improve quality and expand access across the province: pharmacare, home care, community care, long-term care, primary care reform, hospital restructuring, investments in new technology. Working with nurses, hospitals, doctors and other health care providers, we continue the task of reforming Ontario's health care system. We want the federal government to join us in these reforms. We want the federal government to demonstrate its commitment to reform by providing the long-term sustainable funding needed to make reform possible. We wanted last

week's meeting of health ministers to be the start of federal co-operation. As Allan Rock himself said on March 10, "Preserving medicare is going to cost more than words, and the federal government must be there to do its share."

*Interjections.*

**The Speaker (Hon Gary Carr):** Order. Would the Premier take his seat for a moment, please. We're going to start off this session, when statements are being read by ministers and responses come, I would appreciate it if the members were quiet. What happens is that when the minister makes a statement and there is a large amount of heckling, and then when responses come, both sides are not able to hear each other.

1420

In the standing orders, there is provision for the opposition to have time to respond. Each of the critics will have time. I would appreciate it if the members would allow the minister to give the statement without the shouting that goes on.

*Interjection.*

**The Speaker:** Order. I say to the member, we're going to start off this session, and if it turns out that members don't do that, then they'll be watching on TV from their offices, because we are not going to proceed—

*Applause.*

**The Speaker:** Order. I know the government members wish to be of assistance, but it isn't helpful when you clap when the Speaker has a ruling. I want to make sure that members are very clear about this, because I'm going to be just as vigilant when the responses come back, when the government members yell across to that side, as well. Sorry for the interruption. Premier.

**Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader):** Point of order, Mr Speaker: Could you restore a minute of time to the clock?

**The Speaker:** Yes, I'm sorry. I should have stopped the clock. I apologize. The clock will be restored.

**Hon Mr Harris:** If Allan Rock was sincere when he made that statement, he would have come to Markham and announced not only full restoration of the CHST to where it was before the federal Liberals began cutting, but also sustainable ongoing funding sufficient to meet the needs of our growing and our aging population, needs that are the focus of so many of our reforms.

But that's not what happened. Unfortunately for Canadians, the health ministers' meeting was a failure. It was a failure because the federal government didn't come prepared. The federal government clearly hadn't done its homework. It had no new suggestions. It had nothing to offer in either money or ideas.

The federal minister had been saying that he wanted to talk about ways to reform the health system, even though Ontario and the other provinces are already doing that. But he didn't even come to the meeting prepared to talk about that. Our health minister, Elizabeth Witmer, was prepared to share information on our long-term care and community care reforms, prepared to share information

about the progress we've made—a plan to create 20,000 new long-term-care beds, a 49% increase in funding for community services and a \$1.5-billion annual investment in home care and community care—and about how the expansion could in fact be accelerated with increased federal support.

But Allan Rock didn't talk about these reforms. Is he in favour of our long-term care and community care expansion? Is he opposed? Does he have any new ideas? We don't know. All we know is that he came to the meeting without any authority to commit to financial support for these reforms. Our health minister took with her information about Ontario's drug program, which is already the most generous in the country, about how much it costs, what it would take to extend it to a national pharma-care program, cost shared 50-50 between Ottawa and the provinces. We're certainly willing to participate in a national pharma-care program so that Canadians can have equal access to drugs, regardless of which province they live in. But Allan Rock wasn't ready to discuss that.

Is he in favour of Ontario's pharmacare? Is he opposed? What sort of program does he contemplate? We don't know. All we know is that he came to the meeting without the authority to agree to anything.

Our health minister was prepared to help Allan Rock understand primary care reform, because unlike the federal government, instead of talking about primary care reform, we're actually doing something: pilot projects now in seven communities, discussions with the Ontario Medical Association as to how we can work co-operatively together, government and the Ontario Medical Association, to expand patients' access. Our minister was prepared to explain to the federal government that primary care reform will not save money, and in fact will probably require significant investment, but it will provide better health care and it will help us improve physician distribution in underserved areas. So we would welcome stable federal funding to make this reform work.

But Allan Rock had nothing to contribute. Is he in favour of our approach to primary care reform? Is he opposed? Does he think we should be doing it faster? Should we be doing it slower? Should we be doing it differently? We don't know. All we know is that he came to the meeting lacking the authority to commit to any funding. In fact, he was so unprepared that all he could discuss were plans for future talks.

If there are to be future meetings, Allan Rock needs to do his homework, and he had better be prepared to come with new ideas. He should tell us what new national reform programs he is prepared to support. He should come prepared to tell us which provincial reforms he doesn't support. He should tell us what else he thinks we should be doing.

When he comes he must know how many long-term, stable, inflation-adjusted dollars will be available to the provinces to embark on new reforms. Provinces, you see, are leery of new national programs without guaranteed funding. Why? Think of medicare: 50-50. Medicare was



50% federal and 50% provincial. Today in Ontario it is 89% provincial and 11% federal.

Our population is growing and aging. The cost of new technologies and innovative medical treatments is rising. Yet the federal Liberal government inflicted the most massive cuts to health funding in Canadian history. Annual base federal funding for health care is still \$4.2 billion lower than when the Liberals started cutting. In response to this reality, every provincial government in this country has not only made up the federal shortfall but has increased funding for health care and is working to reform and improve the system to meet the health care needs of the people of Canada today and into the future.

In Ontario we've done the same. In fact, we're investing more in health care today than any previous government at any point in our province's history. Not only did we make up the \$1.7-billion federal cut to Ontario; we've increased annual funding by \$3 billion more on top of that since we took office. That's how we have responded to the changing health care needs of the men, women and children of Ontario.

But the federal government's response has been different. So today I am asking members of the Legislature to put aside partisan differences and to unite to seek restored federal health funding.

I have drafted a resolution that I will table today. The motion reads as follows:

Be it resolved that the Legislative Assembly of the province of Ontario:

(a) Condemns the government of Canada for cutting, by \$4.2 billion annually, base payments under the federal program that supports health care, the CHST, while provincial governments have increased health spending;

(b) Urges the government of Canada to repudiate the statement attributed to a spokesman for the federal finance minister, the Honourable Paul Martin, that increasing health funding would be "just shovelling money into a hole that's going to open right back up again";

(c) Urges the government of Canada immediately to restore permanently the health funding that it has cut, and to assume its fair share of increased, ongoing funding to meet the health needs of our country's aging and growing population; and

(d) Reminds the federal Minister of Health, the Honourable Allan Rock, that the sincerity of his commitment to medicare and the principles of the Canada Health Act would be best demonstrated not by idle rhetoric and vague words but by restoring the health funding that he has cut.

At this moment, I would like to credit the leadership of Ted Arnott, the member for Waterloo-Wellington, who tabled a similar resolution before the House rose last fall.

The federal government talks about reform, but provincial governments, nurses, hospitals, doctors and other health providers are already working on reforms to improve our health care system. Allan Rock talks about innovation and change, but across Canada we're already

moving forward to introduce the very changes that he just talks about.

There's only one innovation still lacking, one that certainly would be new and different, and that would be a federal commitment to provide its share of health funding for the very important reforms the provinces are already working on.

I am asking all members to consider this resolution carefully and I'm asking them to lend it their unanimous support.

1430

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** I rise today to support the request for the urgent need for the federal government to restore its cuts to health funding and to also provide long-term sustainable funding in order that we can continue with the reform of our health system.

Last week in Markham, I brought information on Ontario's health action plan for reform to the meeting with the Honourable Allan Rock. As we all know, health care reform in this province is well underway, and I can assure you that it is well underway throughout Canada in each province and in each territory.

Our work has been based on our vision of health. We believe in a vision that promotes wellness and improves health outcomes for Ontarians through accessible, integrated and quality services at every stage of life and as close to home as possible.

Last week I told Minister Rock that we have a plan where we are expanding home care for Ontario citizens. We don't have the copayments that other provinces do. Our government has increased funding to support this program by 49% since 1995, which enabled 420,000 Ontario citizens access to home care services in 1999 alone. In addition, we are creating 20,000 new long-term-care beds to meet the needs of our aging population.

I told Mr Rock that Ontario's health action plan includes ensuring that we continue to have one of the strongest provincial drug plans in the country. Ontario's is among the most generous. We pay for 44 million prescriptions every year for more than two million seniors and social assistance recipients. Our drug plan also financially assists individuals who need expensive drugs to treat serious illnesses such as cancer, HIV and cystic fibrosis. In fact, we have added 1,000 new drugs to the formulary since 1995.

I also told Mr Rock about our plan to expand primary care reform and the introduction of nurse practitioners. We have been working with the Ontario Medical Association on pilot primary care sites across the province. These pilots will expand public access to family physicians and health professionals, including nurses and nurse practitioners, on a seven-day, 24-hour basis.

I can assure you, the provinces and the territories understand and are reforming their health systems in a systematic way. They are doing everything possible to improve health care by putting more money into a patient-centred system that responds to the growing and aging needs of our population.

In our province we have supported our health plan with an increase in annual health funding of \$3 billion since 1995, despite a funding cut to Ontario of \$1.7 billion by the federal government. We, in this province and across Canada, have not had the luxury of waiting for the federal government for leadership on the reform of our health systems; in fact, we have all had to embark upon this health reform during a time of drastic reductions of \$4.2 billion in CHST payments.

At the conclusion of our meeting last Friday, the provincial and territorial health ministers unanimously called upon the federal government to immediately and permanently restore the full federal cut in CHST cash payments with an appropriate escalator to ensure that funding for health through CHST keeps pace with the economic and social factors that impact on the sustainability of the system.

We also asked the federal government to reaffirm its commitment to the Canada Health Act and we indicated that we have been, and will always remain, willing to meet with the federal government to discuss ways to improve, strengthen and modernize our system for our citizens.

I would urge the House to support the motion of our Premier.

**Mr Dalton McGuinty (Leader of the Opposition):** What I intend to do at this point in time is to read the motion which I attempted to introduce just a short while ago but which was rejected by members of the government. Contrary to the motion put forward today by the Premier, this one is grounded in fairness.

Be it resolved that, in the opinion of this House, the current levels of health care funding provided by both the federal and provincial governments are insufficient to properly modernize Ontario's health care services and to provide the quality care that Ontarians need and deserve; and

Be it further resolved that this House strongly condemns both the federal and provincial governments for wasting millions of health care dollars on an advertising war when this money is needed to improve and modernize Ontario's health care services; and

Be it further resolved that this House demand that any increase in federal health funding be spent entirely on health care and be applied on top of the levels of health care funding already committed to by the province.

I too table this motion.

Unlike the Premier, I have been spending a great deal of time travelling the province during the intercession and listening to Ontarians. I can tell you that they don't want us to fight over health care; they want us to fight for their health care. Among other things, they are questioning why it is that if, according to the government—and we believe this—there is a desperate need for a new infusion of money, of dollars, into health care today, how is it that this government at the present time can spend \$3 million-plus on an ad campaign attacking the federal government?

In addition, Ontarians, quite naturally, are questioning the sincerity of the present attack being launched by the Premier against the federal government. Prior to the budget, the Tory party ran radio ads, and if we reach back and consider what the subject matter of those radio ads was, they did not ask Ontarians to apply pressure to the federal government to encourage them to give us more money for health care; those radio ads said that all Ontarians should contact the Prime Minister and urge him to cut taxes. But today apparently we're going to run TV ads, we're going to deliver brochures door to door throughout Ontario paid for by taxpayers—that's what the government is doing—attacking the federal government now for listening to them up front.

There is more than enough blame to go around when it comes to the state of health care in Ontario today. One of the things that so disappointed us most recently was this government's decision to shelve primary care reform in Ontario. I can tell you, as a result of my travels, that Ontario families lead hectic, just-in-time lives. They deserve access to 24-seven health care, 24 hours a day, seven days a week.

1440

At the bargaining table, Premier, when it comes to modernizing health care in Ontario, we can't just have the doctors. This issue is far bigger than just the doctors. At that table we need our nurse practitioners, we need our nurses, we need our other health care professionals, and we need representatives of the patient groups. That's what we need there.

It's time for the government to stop engaging in this blame game, stop engaging in passing-the-buck tactics and begin to respect the need by all Ontarians to modernize and revamp our health care system. If we don't modernize our health care, we're going to lose our health care. These are the people responsible for delivering health care in Ontario. That's what Ontarians want us to do. They want us once more to stop fighting over health care and to start fighting for health care.

**Mr Howard Hampton (Kenora-Rainy River):** We welcome the debate about health care. This is a debate that is long overdue. I want to say to the Premier and his government, look, there's no secret about what the Liberals in Ottawa have done. It's no secret that they've taken \$4.2 billion in annual funding from health care. That's known. It's also known that they took the \$4.2 billion from health care funding without any strategy for primary care reform, without any strategy for home care, without any strategy for pharmacare and, worst of all, without any strategy for something which is their constitutional responsibility, the health care of aboriginal people. All that is known. And it is known that for Liberals to engage in lecturing anyone about medicare is indeed theatre of the absurd.

*Applause.*

**Mr McGuinty:** But, Premier, this is Ontario.

**The Speaker:** Order. Stop the clock for a moment, please. Order.



As I said earlier, and I'm addressing the government members now, in situations like this on both sides it would be more helpful if we actually listen. I know applause is seen as support, but when it's coming from the opposition benches, it makes it difficult for the member speaking. I would appreciate it if the members on the government side would listen for the remainder of the response.

Leader of the third party.

**Mr Hampton:** Premier, this is Ontario and it's your health care record we're here to discuss. It's your health care record where one of the first things you did as a government was you went out and you laid off 10,000 nurses and you described them as out-of-date Hula Hoop workers. Then you scramble to rehire the 10,000 nurses when you discover the health care system doesn't work without them.

It's a government where one of the first things you did was to cancel the cancer treatment centres in places like Durham region and Mississauga. You discontinued the training programs for the very health care workers who were going to work in those cancer treatment centres. What are you doing now? Sending cancer patients to Buffalo, to Detroit, because of a mistake you made in your first year of government. Not only that, but to cover up your mistake you're paying all of the costs to send cancer patients to clinics in Thunder Bay and Sudbury when cancer patients in northern Ontario are being told, "Find your own way there. Pay your own way to this cancer treatment centre"—all to cover up your mistake.

What is your vision of primary care? We saw the negotiations three years ago where you said you were going to push forward on primary care and your then Minister of Health said you were going to push forward on primary care. What did you do? No primary care. At the end of the negotiations you opened up the vault for the doctors and said: "Come on in, fellas. Take all the money you want." No primary care reform, no nurse practitioners, no needed changes to the health care system.

What do we see happening in the negotiations now? The same thing. A lot of rhetoric from you and your Minister of Health back in January and February, but now we find primary care reform isn't on the books. Nurse practitioners aren't going to move forward any faster than they have in the first five years.

What else have we seen, Premier? We see seniors who are now being limited in their hours of home care. We're seeing seniors who have to go off to a long-term-care facility because you've limited their home care.

At the end of the day, Premier, what are you doing to the health care system of Ontario? What you're doing is this: You're moving Ontario's health care system in the direction of the private, for-profit American system.

Home care: Most of the home care contracts are now going to private, for-profit corporate operators, many of them American, who have a terrible record in the United States—70% of the long-term-care beds to private, for-profit corporate operators.

Ambulances: You're shredding those and sending them down to the municipalities with no new money. They're going to privatize.

What are you doing to public health? The same thing: Handing it off to provinces.

Premier, before you go to the federal government and say to them, "Put the money back in," let's see your strategy for integrated health care in Ontario. Let's see your strategy, not three years of rhetoric about primary care. Let's see a health care strategy that does move us towards more community health centres where people get the health care they need.

We're going to support your motion, but we want to amend it. The amendments are:

That the government of Ontario adopt the following four principles: a ban on the Ralph Klein-style, for-profit hospitals and clinics; a freeze on the delisting of health services; an end to the proliferation of private, for-profit long-term care and home care; and a tougher inspection system and stiffer penalties for independent health facilities.

That will be a real step forward.

**The Speaker:** Just before we begin question period I would like to say this. As the members know, in the last session I was rather lenient in terms of the time, particularly with new members. Now that we're in our second session, in terms of speaking and questions, it's only fair that we all have equal time in the questions and in the responses.

You will also know that in the last session you had approximately a minute. At around 50 seconds I would advise the member to ask the question, and they had about 10 seconds to ask the question. That, I think, was rather confusing to the member when I was yelling out "Question" and so on. Sometimes they didn't know whether it was me or the opposition or the people on the other side of the House. Also, it was very difficult for me to listen to the question while trying to keep track of the time.

With your indulgence, what I would like to do is have approximately a minute for the questions, but now that we're in our second session we must stick to that fairly closely. Even if I see that you're getting to the end of the question, if it comes to about a minute and you haven't asked the question, I will have to cut you off and give it to the appropriate minister; obviously the same thing on the government side as well. In that way we will be fair to all the members involved, and all the members now have experienced a period in here, and I say that to some of the staff who may be watching who help in writing some of the questions, that we will try to keep them at around a minute.

*Interjections.*

**The Speaker:** I did say "assist with them." I know members write their own questions, but staff assist with them.

## ORAL QUESTIONS

### ONTARIO REALTY CORP

#### **Mr Dalton McGuinty (Leader of the Opposition):**

My question is for the Premier. We believe in open, honest and accountable government, and that's why we are so appalled by the recent cover-up of the scandal at the Ontario Realty Corp. Auditors there have been telling us that taxpayers have been ripped off, and now we learn that the police have been called in to conduct a criminal investigation.

Premier, can you explain to us why the minister responsible and the president of the ORC have not been forced to resign?

**Hon Michael D. Harris (Premier):** I think the member knows that this government takes any allegation of wrongdoing very seriously. That is why the Chair of Management Board, the Honourable Chris Hodgson, has fully supported the recent steps taken by the ORC board and the CEO to independently audit ORC sale transactions dating back through two full real estate market cycles to 1985.

I might say that at the outset of the expanded audit process, the minister clearly stated his expectation that any indication of any wrongdoing uncovered by the audit would be forwarded to legal authorities. On Wednesday of last week, I understand that audit staff met with the Assistant Deputy Attorney General, as is the practice, and the criminal law division to review certain questionable elements related to a small, but concerning, number of past ORC transactions. So that's where the matter lies. I think the minister has taken the appropriate action.

1450

**Mr McGuinty:** Premier, what this really boils down to is an issue of ministerial, and indeed first ministerial, responsibility. That's what this is all about. You've brought in the police, and the auditors are in there. But what the Ontario public expects and demands is that you and your minister accept responsibility for what has gone on at the ORC.

We're talking, in one case, about a land flip. Land was originally purchased at \$1.25 million and sold a week later for just under \$4 million. Premier, that happened on your watch. It happened on your minister's watch. None of these deals can get by without the specific approval of your minister.

Premier, either your minister did not know this was happening, or he was covering up. It seems to me that the responsible thing to do on your part today, Premier, is to ask for his resignation.

**Hon Mr Harris:** Clearly, allegations have been made. We need to look into whether these sales were handled properly, whether they were tendered properly, whether we got the best offers and whether the procedures the minister oversees were followed. That, in fact, is what the investigation is all about. We take these matters very

seriously. Clearly, some sales occurred on our watch. I understand we have asked both the minister and the head of the ORC to take a good look at what has happened over the last 15 years. The goal: to uncover if indeed there is any wrongdoing. Now, as you know, the police are investigating as well. I think this is exactly what the public would want their minister to do.

**Mr McGuinty:** Five months ago, Premier, when we raised these issues in this Legislature, your minister said there wasn't anything wrong, that everything was okay. Five months ago we asked him to call in the police, and he refused. Now we discover that there have been a series of land flips which are hurting Ontario taxpayers. Now you decide you're going to bring in the police.

What we want you to do, Premier, is to accept responsibility. Responsibility has to stop inside your cabinet.

Here's a little reality check. Fact: For months, there have been questionable land deals costing taxpayers millions in lost revenue. You've now been in office for six years. Notice I said "in office," not "on the job." Fact as well: It's business as usual over at the ORC today. Another \$200 million worth of new sales are still planned at this very time, Premier. Why have you not fired your minister, and why have you not frozen all land sales until both the police and the auditor have completed their investigations?

**Hon Mr Harris:** I guess if every transaction, every business dealing by every bureaucrat in every agency we are associated with and fund, if they did not require ministerial responsibility, we wouldn't have ministers. We do have ministers, we do have cabinet, we do have the Premier and we are all accountable. That is why, whenever anything untoward is brought to light, the minister immediately undertakes to look into it. It's no secret that Mr Miele—the minister brought in a new Chair and a new executive director to take a good look at the practices of the ORC. That was done by the minister, and, thank goodness, he's there overseeing it.

### PRIMARY CARE REFORM

#### **Mr Dalton McGuinty (Leader of the Opposition):**

This is for the Premier. We believe that Ontarians are entitled to receive quality health care 24 hours a day, seven days a week. To do that, we're going to need primary care reform in Ontario.

You're in the middle of negotiations with the OMA, and just recently you threw away primary care reform as though it were a worthless chip in a basement poker game. Premier, I remember when you used to argue most eloquently, in fact; you used to put a great case forward for primary care reform. Now you've decided that when it comes to negotiations with the doctors, it is simply not something you're prepared to go to bat for. I can tell you, Premier, that Ontarians want and deserve primary care reform.



Why is it that at this point in time you have abdicated your responsibility to represent the interests of Ontario patients?

**Hon Michael D. Harris (Premier):** The minister may want to answer, and if she does, I'll give her an opportunity later. But I can tell you that to the best of my knowledge not one shred of difference has taken place from our negotiating position when we started these negotiations to today. I am not free to go into the details of those negotiations, as you would appreciate and understand, but you clearly are basing your question on information that is not accurate.

**Mr McGuinty:** Duncan Sinclair, the man who headed up your own hospital restructuring commission, tells us that your decision to back down when it comes to primary care reform in Ontario means that Ontarians are going to have to wait 10 long years before they have access 24 hours a day, seven days a week. That's what your guy is telling Ontarians. You used to say that primary care reform has to be speeded up. You used to say that it was absolutely essential because it's going to deliver better quality health care to Ontarians. I agree with that.

My question again is, Premier, why have you abdicated your responsibility to move the agenda forward when it comes to the reform and modernization of health care? Why have you forsaken primary care reform in Ontario?

**Hon Mr Harris:** I think the minister wishes to respond.

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** We are continuing to expand primary care, as we always said we would. We said it would be voluntary for both patients and practitioners; there would be choice. We also said that appropriate evaluation would take place in order that we could continue to make appropriate changes to the system as we ensure that we have 24-hour access to medical services available to patients everywhere in this province.

We have actually expanded the number of primary care pilot sites from the original five to seven. We will continue to work collaboratively with the Ontario Medical Association in expanding these primary care sites throughout the province of Ontario, as we have always intended to. There has been no change in the plan.

**Mr McGuinty:** It's good to hear today from the minister representing the OMA, but it would be nice to hear from the minister representing the greater health care interests of all Ontarians. You know, Minister, that if we're going to move this agenda forward, at that table should be nurse practitioners, nurses, other health care professionals and representatives of the patient community. It is simply impossible to move primary care reform forward in that context. In order to make that happen, it's going to require leadership on your part and on the part of the Premier. Ontario families can't wait 10 years to have primary care reform up and running. Duncan Sinclair has suggested that we do it in six years—hardly lightning speed, but at least he's got something on the table.

I ask you again, Minister, why are you refusing to move forward with the primary care reform agenda, something that Ontario families need as soon as possible?

**Hon Mrs Witmer:** Obviously the Leader of the Opposition is confused. He obviously didn't hear the comment that we have actually gone beyond the five pilot sites that originally were intended to only be in place by today, and we actually have seven sites in the province at the present time. In fact, we have always said we would ensure that we would do the appropriate evaluation.

When you go forward with primary care reform, I think you need to make sure it's going to respond to the specific needs of all the health care professionals who will be involved in the delivery of primary care. We have always indicated that it involves more than physicians. In fact, as the Leader of the Opposition knows, we are now funding 226 nurse practitioner positions. They are available in the primary care system and the long-term-care system. We will continue to expand those primary care sites as we intended.

1500

**The Speaker (Hon Gary Carr):** Order. The time is up. New question, the leader of the third party.

**Mr Howard Hampton (Kenora-Rainy River):** My question is for the Premier and it is, not surprisingly, about health care. Three years ago you promised the people of Ontario primary health care reform. You said it would give us a better health care system. Then, three years ago, you entered into negotiations with the doctors. You gave them an additional \$500 million. Your fee-for-service payments to doctors have ballooned by 15%, to \$4.4 billion last year. But what did the people of Ontario get? Crowded emergency rooms, longer and longer waiting lists for cancer treatment, a shortage of family doctors. Your record in health care is one of handing over more and more money to the Ontario Medical Association. Meanwhile, the people of Ontario can't get to see a doctor, wait longer for cancer treatment, can't get the home care they need and go increasingly to more and more crowded emergency rooms.

Premier, what happened to your strategy for primary care?

**Hon Mr Harris:** As you've heard from my response and from the Minister of Health, absolutely nothing took place in primary care reform in the 10 years previous to our taking office. We started with virtually total inaction on the part of the government. I think the last contract the NDP government signed with the doctors was a total contract for fee for service.

Since then, as you know, we are in the middle of negotiations with the doctors. I don't think it's appropriate for me to comment on those negotiations, but it is no secret that, three years ago, we indicated a desire to move forward with primary care. It's also no secret, I might add, that one of the directors of the OMA, a doctor who happens to live in North Bay as a matter of fact, was a leading advocate for primary care. So, contrary to doctors not wishing to proceed, in fact the model of the

five original pilot projects, and now seven pilot projects—

**The Speaker:** Order. I'm afraid the Premier's time is up.

**Mr Hampton:** You boast about five pilot projects, expanding to seven. That's all it amounts to after five years of your government. We had 55 community health centres when you took office. That was the leading edge of primary care reform. What have you done? You've frozen the community health centres. We had 57 health service organizations. What have you done there? You've frozen them. As a government, in your first month of government, you could have moved forward on nurse practitioners. When did you finally move an inch on nurse practitioners? Just this past fall. We now have 99 communities on the underserved areas list, the longest it has ever been in the history of the province.

Premier, I take you up on your word. You say you believe in primary health care reform. You say it will provide better health care for the people of Ontario. We agree with you. We're saying to you, move forward. When are you going to move—

**The Speaker:** Order. Premier.

**Hon Mr Harris:** Let me say I particularly appreciate the member's support for the direction, the initiative and the recognition that this is the way the government wishes to move. I might say his support is far more meaningful than Allan Rock's, who talks about it but won't talk about it in a health ministers' meeting, won't recognize it and will not fund it. I might add that some have talked about whether we could have primary care reform complete in six years or in 10 years. At the rate of the federal funding, we won't have it in place in 100 years. We need help from the federal government. Primary care is important but it costs money. It costs more money than the system we have in place today. We are moving as expeditiously as we can, not by decree, not by authoritarian order as the provincial Liberals want us to, but we are moving without federal money in a co-operative way with all health care professionals.

**Mr Hampton:** For 15 years, successive governments in this province moved ahead on primary health care reform. Larry Grossman, a former Conservative health care minister, moved ahead on it. Throughout the late 1980s and into the early 1990s, we made incremental steps: community health centres, health service organizations, nurse practitioners. Your government has stalled it.

Premier, if you can't move ahead under your own steam, let me make a suggestion to you. I've put forward a private member's bill. I'm going to call it the Tommy Douglas Act to preserve Medicare. In it, we can outline the steps and the time lines for primary care reform. Instead of going through two negotiations with the doctors and getting virtually nowhere, we can put out the timetable and move according to that timetable. If the Liberals in Ottawa don't want to move, then that is their shame, that is their problem. This can be done in the province of Ontario. Will you do it, Premier?

**Hon Mr Harris:** Again, I appreciate the member's support for discussion, for debate, as articulated earlier today. I appreciate that he has a bill. We'd be happy to take a look at it. It would be the only constructive thing that's come from the opposition party. I shouldn't say that, there have been others, but in a concrete way we have nothing from the provincial Liberals. We don't even have support for them to wrestle money that was slashed by their federal cousins in Ottawa. So we welcome your participation, and I think it's being brought forward in an honest attempt to assist all of us to move forward. We look forward to working with you, and we'll take a look at your bill.

#### ONTARIO REALTY CORP

**Mr Howard Hampton (Kenora-Rainy River):** I have another question for the Premier. On Friday, the police were finally called in to investigate how taxpayers are being bilked at the Ontario Realty Corp. But while the police investigate, the minister who presided over this and the Conservative Party hired hand are still in place. This is unheard of.

Premier, you must recognize that in November 1998 this minister, Mr Hodgson, received a complaint from Jeff Lyons, the prominent Conservative fundraiser. Then, although Mr Hodgson denies involvement, a whole series of deals happened. The Keg Mansion property was cancelled. Someone named Tony Miele comes on to run the ORC. Then two more deals, a flip of land in Mississauga to Frank Gabriele and the sale of a warehouse at 145 Eastern Avenue in Toronto, both deals where taxpayers were bilked, happened under Mr Miele's supervision and Mr Hodgson's supervision.

**The Speaker (Hon Gary Carr):** Order. The time is up. Premier.

**Hon Michael D. Harris (Premier):** You've mentioned some transactions that in fact were not transactions, and no sales took place, so I don't know how anybody was bilked. Let me say that the individual who is the chair now, or the chief executive of the ORC, was hired by a new board brought in by this minister, a new chairman, new board members, approved by all of you unanimously, by all the Liberals and by all the NDP members, who said, "Yes, we need a new board." Those members—who were approved unanimously by all of you—elected, among themselves, a new chairman, Mr Mavrinac, a very respected former municipal politician in the province of Ontario. They went out and hired a new chairman, and agreed unanimously that this new chief executive officer they hired was in fact who they should put in place to try and take a look at all of—

**The Speaker:** Order. The Premier's time is up.

**Mr Hampton:** Premier, if there's going to be an investigation that gets to the bottom of this, the minister who presided over it and Tony Miele who presided over it have to go. If you won't make them go here, maybe under your new bill, you can go after their parents or something.



Look, this is just a case of a number of shady deals happening under Mr Hodgson's watch and happening under Mr Miele's watch. For you to say that there is an investigation that's going to get to the bottom of it, when the two people who presided over it and who are responsible for it continue to be there—it's absurd.

Premier, do the right thing. Mr Miele and Mr Hodgson have to step aside. They were in charge when a number of these shady deals happened. It shouldn't have taken them 15 months to call in the police when it was obvious from the beginning that something was wrong. Do the responsible thing. If this is going to be a good investigation and people are going to be held responsible—

**The Speaker:** Order. The member's time is up. Premier.

**Hon Mr Harris:** You are talking about the two very people who were the whistle-blowers, the two very people who called for the audits in the first place, the two very people who, using the appropriate chief executive and ministerial oversight, are getting to the bottom of it, the two people who are bringing this and shedding some light on what was going on there. Do we like it if there's inappropriate action? Of course not. But the chief executive officer and the ministerial responsibility is to bring these issues to light and bring in the appropriate investigation, and that's what's happening.

1510

#### HEALTH CARE

**Mrs Lyn McLeod (Thunder Bay-Atikokan):** My question is for the Minister of Health. I believe that the people of this province want an assurance that we're not going to have more and more of our health care provided in for-profit American-style hospitals. This government has been determined from the day they took office to move more and more to for-profit American providers of health care.

One of the first pieces of legislation this government passed was the infamous bully bill, Bill 26. One of the things that Bill 26 did was to change the Independent Health Facilities Act. The act used to have a clear statement that preference had to be given to not-for-profit Canadian providers of health care. The Harris government made sure that this preference was removed from the act, deliberately opening the door to for-profit American providers.

Minister, will you tell us today, why is your government so determined to have for-profit American companies operating in Ontario?

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** As the member well knows, there have been private companies operating in this province since the early 1970s. If you take a look at home care, in fact under your government, the Liberal government, and under the NDP government, we all had private companies operating in this province, and we have made absolutely no change at all to that process that was put in place in the 1970s.

**Mrs McLeod:** Minister, your government took out a clearly stated preference in law for not-for-profit Canadian companies providing health care in independent health facilities. It was there to prevent a US-style take-over of providing health care and your government took it out. And you made another change in that same act. You removed any requirement for a public tender to establish a new private facility, so you can now give a licence to anyone that your government wants to favour and it will all be done very quietly without anybody knowing what is happening.

Minister, I suggest to you that your government has already made at least one serious mistake in inviting a for-profit American company into Ontario, a company subsequently charged with fraud in the United States. I'm wondering if you've learned a lesson from this, and I'm asking if you will give the people of this province a guarantee that you will not keep granting licences to for-profit American companies to provide health care in Ontario.

**Hon Mrs Witmer:** Again, I would say to the member opposite, we are following the same course of action that was started in the 1970s. When you were in office there were private companies providing health services. When the NDP were in office, the same thing. We are continuing in the same way. We want to ensure that the people in this province have the best health care possible, and we'll continue to make sure that that happens.

#### COMMUNITY SAFETY

**Mr David Young (Willowdale):** My question is for the Solicitor General, and it relates to the number of police officers on the streets of this province. Before I pose the question, I want to be clear that the people of Willowdale, the people of this province, are certainly grateful to the members of various police forces who represent us with great courage and determination on a daily basis. We also appreciate that the number of police on the street, albeit important, is only one component in community safety. While our government has taken steps forward in numerous other ways to protect the people of this province, we are looking forward to the federal government coming forth with some meaningful changes, particularly to the Young Offenders Act and its successor.

Let me ask the minister if he can tell the people of my riding and the people of this province how it is that our government is addressing the issue of community safety and putting more front-line police officers on the streets of Willowdale, the streets of Toronto and the streets of this province.

**Hon David H. Tsubouchi (Solicitor General):** I thank the member from Willowdale for the question. The member has always been a very strong advocate for community policing as well. This gives me a chance to talk about the community policing partnership program which we brought in. It's a \$150-million program designed to bring 1,000 net new police officers to the streets of this province.

I was privileged to be at the recent graduation ceremony for C.O. Bick College. That's where the new recruits come from for the Toronto police. There are 69 members of this graduating class—highly skilled, highly enthusiastic, by the way. Some 51 of these people had some manner of post-secondary education, a degree or diploma, but also the ability to speak 12 different languages. Of these 69 graduates, I'm happy to say that 36 are a direct result of the community policing program.

**Mr Young:** I'd like to thank the minister for his response. I know that our government is doing all it can to ensure that Ontarians have the ability to live and work in a safe environment. We all know how difficult it is for people to be successful if they don't feel safe in their communities, on their streets and in their homes. Every person in this province, regardless of where they live, deserves to feel safe walking the streets of this province.

Minister, you mentioned in your answer that we are funding new police positions, positions for new officers. You talked about some of the new recruits who have joined the Metropolitan Toronto Police Force. Can you explain to us how we can be sure that the money and the funds directed towards community policing partnership programs in this province will result in additional police officers?

**Hon Mr Tsubouchi:** This \$150-million program to get 1,000 net new police officers on the street is a matching program. Over a period of five years the provincial government will match 50% for these new officers. To ensure that these are net new officers, we benchmark this to June 15, 1998. It has to be an increase in that particular police service over that number in order to qualify for the grant. This will not allow anyone to reduce their police service and then come to the government and ask them to fill it in. This has to be net new police officers.

I'm happy to say that of the 1,000 new police officers in this program, 250 will be assigned to the Toronto police service.

#### INTERNATIONAL ADOPTION

**Mr Joseph Cordiano (York South-Weston):** I have a question for the Minister of Community and Social Services. I'd like to know how you can justify imposing a \$925 head tax for international adoptions in Ontario. There is no such tax for adoptions in Ontario. There is no extra paperwork involved in these adoptions, and the home study that is required is the same for international as well as domestic adoptions. So I cannot understand how you can impose what amounts to an additional burden on these families wanting to adopt internationally.

How can you justify this odious head tax that you've imposed on these families?

**Hon John R. Baird (Minister of Community and Social Services, minister responsible for francophone affairs):** Our government understands the huge challenges that families face when they seek to adopt abroad. These families are making a huge emotional and finan-

cial commitment, sometimes as much as \$20,000 to \$30,000. Last year we moved to implement the Hague convention on international adoptions to ensure that legal safeguards were in place to protect families and, most importantly, to protect vulnerable children.

It is categorically false to label this fee for service a tax. These new, extensive protections and safeguards have significant costs associated with them. Someone has to pay. Taxpayers will subsidize this process, and those using the protections pay a fee for service. No one is making any money as a result of this fee. In fact, taxpayers will subsidize these protections. This effort is about safeguarding the rights and very best interests of children and families.

**Mr Cordiano:** Minister, this is at a time when other jurisdictions are providing tax relief for similar kinds of adoptions. In the United States, for example, a \$5,000 tax credit is made available to families who adopt internationally.

When we passed the legislation you referred to for international adoptions in this House, we did so unanimously. There was no mention of a head tax or even a fee. I cannot understand, Minister. You can't justify this. You simply cannot begin to justify this to those families you referred to, who are having to go through the emotional burdens you have described. You know what it's like for these families. It's no secret. In addition to all the burdens they have to overcome to go through one of these international adoptions, you have imposed this huge tax. It's odious and unjustifiable, and will you today eliminate it? Stand in your place today and eliminate that odious head tax, Minister.

1520

**Hon Mr Baird:** Our actions and our motive in introducing and passing the Intercountry Adoption Act are all about safeguarding the huge emotional and financial commitment of families and protecting vulnerable children. We've heard far too many horror stories that families have encountered abroad, and that is why we are bringing in these new safeguards.

In a perfect world, I suppose, it would be great if the government could provide every service without any fee. But in a perfect world we wouldn't need to bring in these new measures.

This legislation, as the member opposite said, passed unanimously. The legislation we all voted for did not contemplate a fee. If he read the legislation he'd see that. But the reality is that we don't want to stand in the way of any family trying to adopt. In cases of demonstrated financial hardship, the regulations under the act allow for the fee to be waived, and that is certainly the government's intention. These new measures are important and will help protect both families and vulnerable children.

#### ONTARIO FARMERS

**Mr Bert Johnson (Perth-Middlesex):** My question is for the Minister of Agriculture, Food and Rural Affairs. Our government has made it a priority to ensure that



Ontario farmers get their fair share of federal safety net dollars. By that I mean market revenue, crop insurance and NISA. As you know, this is an issue of great importance to the farmers in my riding of Perth-Middlesex.

Could you please update the House on how these negotiations are going?

**Hon Ernie Hardeman (Minister of Agriculture, Food and Rural Affairs):** As the House will be aware, we have now been in negotiations with the federal minister for some eight months to make sure we can sign a new agreement which provides fair funding for the farmers in Ontario. Two weeks ago, we came to a consensus with all the provincial ministers and the federal minister that the farm safety net money that the federal government provides will be divided fairly among all provinces based on the size of the agriculture community in each province.

This, of course, is very good news for the farmers in Perth-Middlesex, in Oxford county and everywhere else in the province. It means that everyone will get a fair share of the money available. Regardless of where you farm in Canada, you will get the same benefits from the federal program. This is very good news, and I would like to take this opportunity to thank all the commodity groups in Ontario, who have been so active and supportive in coming to this conclusion.

**The Speaker (Hon Gary Carr):** The minister's time is up. Supplementary.

**Mr Johnson:** The fair share is good news for the farmers of Perth-Middlesex and indeed for all farmers. As a supplementary minister, I'd like to know how much money a fair share represents to Ontario farmers.

**Hon Mr Hardeman:** I think it's very important that the House recognize that in the past Ontario has produced approximately 23% of the agriculture activity in Canada and received only 16% of the farm safety net money. With this new agreement, that will go up to 23% if that is our share of agriculture commodities in Canada. If we look at those numbers—and the federal government also increased the \$600 million going towards that, which will bring it up to \$665 million. Using those numbers, this will be a benefit of \$30 million a year for Ontario farmers. So I think this is very good news. The Ontario government is also committed to putting our 40% with it, which will bring it to over \$50 million a year for our farmers in Ontario in the coming years. I think that's very good news for all farmers, including those represented by the members opposite.

### HOSPITAL RESTRUCTURING

**Mr Howard Hampton (Kenora-Rainy River):** I have a question for the Premier. On February 11, the Premier said, "We have no intention of closing Henderson hospital, absolutely." You said, "Henderson hospital is not slated for closure." But today we know that Henderson hospital is being taken apart piece by piece. Last week I was outside the hospital. Premier, you need to know that literally 200,000 people who live on

Hamilton Mountain, in Stoney Creek, Ancaster, Glanbrook and other communities are worried that they will be left without a full-service hospital.

Premier, your Minister of Health, under Bill 23, has the power to take financial control of hospitals. Will you intervene in the Henderson Hospital situation and ensure that that hospital isn't taken apart piece by piece and continues to provide the services the community needs?

**Hon Michael D. Harris (Premier):** I'll ask the Minister of Health to respond.

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** As you know, there was an operational review undertaken of the Hamilton Health Sciences Corp. The RFP went out in August of last year. It would be premature to speculate at this point in time, since we have not yet received the results of the review. But I can tell you, it is expected very shortly. At that time, I know that we will be able to make a response.

**The Speaker (Hon Gary Carr):** Supplementary?

**Mr David Christopherson (Hamilton West):** Let me just say that what's premature is closing the Henderson emergency room and all the support services that are in place to make that room available to the people of Hamilton who use it.

Minister, none of this makes any sense. The fact of the matter is that it was your government that cut \$42 million from the operating budget of the Hamilton Health Sciences Corp, and now because there's a—here it comes—\$40-million deficit, you claim that there have to be all kinds of changes that include closures. Yet it wasn't that long ago that it was your Health Services Restructuring Commission that rolled into town, flattened Hamilton Psychiatric Hospital, downgraded St Peter's, but did say that the four acute care hospital sites in Hamilton would remain.

Now, as a result of your deficit, we're going to lose Henderson. This is unacceptable. Minister, I'm calling on you today to step in and direct that the board will not close Henderson—

**The Speaker:** Order. Minister of Health?

**Hon Mrs Witmer:** There have been no cuts. In fact, let me just share with you that the Hamilton Health Sciences Corp received over \$46 million in additional funding in 1999. They received over \$13.5 million as part of the \$196 million allocated to hospitals in December 1999. They received a base increase of over \$3 million in March 1999. They received over \$3.5 million to support their emergency rooms, \$16 million to address their working capital pressures, and nearly \$3.5 million to hire more nurses.

Let me again reiterate: There have been no results forthcoming from the operational review at this point in time. The only announcement that has been made, as you know, is from an internal working group that has spoken to the changes at Henderson Hospital. We await the outcome of the operational review. It is expected—

**The Speaker:** Order. The minister's time is up.

## COMPENSATION FOR VICTIMS OF CRIME

**Mr Dwight Duncan (Windsor-St Clair):** I have a question for the Attorney General. Your government has spoken a lot about protecting the victims of crime. I want to review a situation with you that I know you're familiar with, and that's the case of Robert Montfortin, who was a 20-year-old student at St Clair College in Windsor in 1971 when he was physically attacked during a crime. Mr Montfortin was rendered a quadriplegic, and has been receiving compensation from the Criminal Injuries Compensation Board ever since.

My constituent reached his lifetime maximum in February of this year and has appeared before the Criminal Injuries Compensation Board to seek an extension. Minister, could you comment on whether or not you feel that my constituent, who was rendered a quadriplegic and is still a relatively young man—could you comment on whether it's your view that his funding should be extended?

1530

**Hon Jim Flaherty (Attorney General, minister responsible for native affairs):** I appreciate the concern the member has, which I share, with respect to the serious nature of the disability suffered by the young man to whom reference has been made.

I can't comment on it. The matter is before the Criminal Injuries Compensation Board. I understand that a hearing did take place recently and, as far as I know, a decision has not yet been forthcoming. In those circumstances, as the member well knows, I can't comment on the workings of the tribunal, pending their decision.

**Mr Duncan:** In fact, Minister, I wrote to you on February 21 to ask for your personal attention on this matter, as I was informed by Bryant Greenbaum, the executive assistant to the Chair, that in fact it would require legislation to deal with this, that you are going to have to amend the Compensation for Victims of Crime Act. That is according to Bryant Greenbaum. We've also spoken with Sheri Reid of your office and have had no written response from you.

Let me ask you today: Will you bring in amendments to the Compensation for Victims of Crime Act to ensure that constituents like Mr Montfortin are not left in a financial lurch as a result of the failures of this act today?

**Hon Mr Flaherty:** Again, I understand the member's concern with respect to the issue, which is certainly a serious one. Having said that, it would be inappropriate for me to comment on the state of the law as it is today, when the appellate tribunal has heard the case and is considering this decision. I'm sure you would appreciate that it would be inappropriate for me as the Attorney General to comment on the case at this point. Let's wait and see what the decision of the administrative tribunal is at the appeal level, which is where it is, and then perhaps it will be necessary to revisit the issue. I thank the member for the question.

## SCHOOL SAFETY

**Mr Joseph Spina (Brampton Centre):** My question is for the Minister of Education. I've heard many times from parents, students and teachers in my community that they are quite concerned about safety in the school system. I know that these concerns have been heard by our government. We're trying to move forward with a province-wide code of conduct. My question to you is, what exactly will this code of conduct include?

**Hon Janet Ecker (Minister of Education):** If one issue has united teachers, parents, students and this government, it is concern for the safety of teachers and students in the classroom. We certainly heard that when the Premier and other members of caucus and cabinet met with some front-line teachers and parents on March 20, when they talked about the concern, when they talked about the fact that teachers can't teach and students can't learn if they are in fear for their safety, which is happening in too many classrooms.

We are proposing a province-wide code of conduct that will have very clear expectations for behaviour. For example, expulsion will be automatic for students who intentionally bring weapons onto school property. There will be suspensions for those who possess drugs or threaten or swear at teachers. We will also have rules of conduct for less serious offences. The goal of this is to have respect and responsibility back in our classrooms, and safety, so that both our teachers can do the job they want to do and our students can learn what they need to—

**The Speaker (Hon Gary Carr):** The minister's time is up. Supplementary.

**Mr Spina:** I'm glad we are moving forward with this. As both the spouse of a teacher and a parent, and with many relatives in the system, I appreciate this progress. I think it's important that young people today are aware of their responsibilities as well as their rights.

Minister, some school boards, such as the two in my area, currently have a kind of code of conduct policy already in place. What will these boards be expected to do, and how will they be complying with this code of conduct?

**Hon Mrs Ecker:** The member raises a valid point. Many boards do have particular sets of rules and codes. But we have heard very clearly is that they were not working the way they should. In some boards and some schools it certainly is very good; in others it is not. The standards are not consistent. Teachers have said that either they don't feel they're backed up when they have to make a decision to keep their classroom safe or they're not clear what authority they have. Frequently decisions have been kicked up to the board level and nothing has happened to protect the principal, the student and the front-line teacher.

We are looking at those practices that work best and we want to make sure that we are taking those best practices and expanding them across the province for a



standard code of conduct which all boards will be quite pleased to support.

I should also say that one of the things it is important to note, because some of our critics across the way keep criticizing this initiative, is that for those students who are being removed from classrooms because of behavioural things—

**The Speaker:** Order. I'm afraid the minister's time is up.

### DOCTOR SHORTAGE

**Mrs Leona Dombrowsky (Hastings-Frontenac-Lennox and Addington):** My question is for the Minister of Health and Long-Term Care. In my riding, Hastings-Frontenac-Lennox and Addington, there is a severe shortage of health care professionals. In communities like Stirling, Bancroft and Marmora, to name but a few, there is a severe shortage of doctors. Not a single family physician in these communities is accepting new patients. Regularly I hear from families with children who must travel long distances to a hospital emergency ward to see a doctor. I hear from seniors who have no continuity of care as their doctors have either retired or moved away and they can find no doctor to renew their prescriptions, as this service is not provided at an emergency room by an emergency room doctor. Minister, what will you do today to address this most serious problem in my riding?

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** As the member knows, our government has certainly recognized that it is important to have an adequate supply, mix and distribution of physicians in the province. We have taken some very unprecedented steps in order to address this issue of supply and distribution. We have taken a lead role and are developing not only short-term but also long-term solutions in order that we can identify what is going to be needed five, 10 and 15 years from now.

Fortunately, the Canadian Institute for Health Information is indicating that the total number of active physicians in Ontario has increased by over 260 since 1997. The number of specialists in the province since 1995 has also increased, by 450. Also, the rate of physicians leaving our province has decreased—

**The Speaker (Hon Gary Carr):** Order. I'm afraid the minister's time is up. Supplementary.

**Mrs Dombrowsky:** Minister, I am aware that recently you had an opportunity to alleviate some of the pressure felt by health care professionals in Bancroft. In my hand is a proposal from the Victorian Order of Nurses for a nurse practitioner who could assist local physicians in Bancroft. This very day in this House you spoke of your government's support of nurse practitioners to improve primary care, yet you turned down this worthy application.

Minister, consider these Ontarians who have no access to a family doctor or primary care services. Will you accept your responsibility for providing adequate health

care? Will you immediately review your decision to fund a nurse practitioner to assist family physicians in the community of Bancroft? Will you take some of those advertising dollars and spend them in Bancroft?

**Hon Mrs Witmer:** Yes, the member has spoken to nurse practitioners, and as the member knows, it was our government that put in place the legislation that recognized nurse practitioners. In fact, I am very pleased to say that we were able to move forward originally with 120 nurse practitioners and most recently with 106 additional new nurse practitioners. We will be continuing to expand our program in order to ensure that underserved communities throughout the province will continue to get the access to physicians and nurses and the nurse practitioners that are required.

1540

### ONTARIO GLOBAL TRADERS AWARDS

**Mr Carl DeFaria (Mississauga East):** My question is for the Minister of Economic Development and Trade. I understand that Ecolo Odor Control Systems Worldwide Inc, a manufacturer of odour control systems located in Mississauga, recently won a provincial Global Traders Award. Minister, would you please tell the House why the Global Traders Award is so important.

**Hon Al Palladini (Minister of Economic Development and Trade):** I'd like to thank the honourable member from Mississauga East for the question. Exporting is vital to our economic success. Over half of our gross domestic product is generated through exports and they sustain 1.6 million jobs in Ontario.

The Global Traders Award is to create an export culture that encourages small and medium-sized businesses to compete in the global marketplace, at the same time recognizing them for the tremendous contribution they make to creating jobs in Ontario. Each nominee represents the best in their exporting excellence and in their community.

My colleague's constituent represents the many successful firms we have in our province, and we're very proud to celebrate those achievements.

**Mr DeFaria:** I understand the regional award ceremonies also include a global trade day forum. Can you explain to the House what discussions take place at such forums and who is eligible to participate?

**Hon Mr Palladini:** The Ontario global trade day forums feature a half-day program of workshops, round-table discussions and networking sessions. The topics of each forum are developed with input from the local participants who participate in a specific community. The objective of the Ontario trade days is to help companies become better and more informed about exporting by networking with other successful exporters. Our goal for the Ontario trade days is to encourage more small and medium-sized Ontario firms to export their goods and services globally, which will translate into more new jobs for Ontarians. Anyone interested in attending these

forums can get in touch with us at Ontario Exports Inc or at 1-877-46-TRADE.

### CHARITABLE DONATIONS

**Ms Frances Lankin (Beaches-East York):** My question is to the minister responsible for women's issues. This weekend the Toronto Star revealed that a charity, the National Society for Abused Women and Children, claims to be providing counselling services for victims of domestic violence, funding for shelters that house victims and their children, and community outreach and support for victims' groups. The charity has been registered for over a year now and estimates are that they have raised about \$116,000 from Ontario residents, but it has yet to fulfill the promises that have been set out. They have about half a dozen people working there; none of them have a background in shelters, social services or counselling. They've raised \$116,000, but only two cheques of \$200 have been offered to shelters at this point in time. The founder says that while they don't provide any of the services they advertise, Rome wasn't built in a day; that was his response. He and his co-chair say they receive expense money but refuse to say how much expense money they have.

The people of Ontario deserve to know that their charitable donations are being spent on the services this organization—

**The Speaker (Hon Gary Carr):** Order. I'm afraid the member's time is up. Minister.

**Hon Helen Johns (Minister of Citizenship, Culture and Recreation, minister responsible for seniors and women):** I'd like to thank the member opposite for her question. I certainly feel the same concern that you do. Of course, we can't presume anything at this particular point, but I think the best thing we could do is look into this, get some more information and talk to Revenue Canada. I make a commitment today to work with the member opposite to do something to have a look at this.

**Ms Lankin:** Thank you, Minister. Revenue Canada is part of who approves charitable organizations, but so does the office of the public guardian and trustee here in Ontario. I'm asking you to do three things specifically today: that your ministry ensure that the office of the public guardian and trustee investigates and audits the national society; that you urge the public guardian and trustee to bring an application for review to the superior court of justice, where a judge can investigate potential improprieties; and that your ministry publish a list of legitimate charities that collect money for victims of domestic violence, including a list of the services these charities provide money to.

Victims of domestic abuse suffer enough indignities without having thousands of dollars of donated money to help with those services sitting either untouched or inappropriately spent. Will you take the suggestions I've put forward and undertake an immediate investigation, audit, action and public advocacy for those legitimate

charities that are raising money for these important services?

**Hon Mrs Johns:** I once again would like to thank the member opposite for her question. Let me start by prefacing and saying that this government will not tolerate violence against women. We do a number of things internally to make sure we protect women in the province, including spending \$110 million a year on violence prevention issues.

I think it's inappropriate for me to talk about the process I should take at this point, but I have committed to work with the member opposite. It's very important that we make sure women get the services they need and that the dollars put forward to go to services for women are rightly allocated to them.

I continue to want to work with the member. I will do that, and we'll make arrangements afterwards to have a look at the issues.

### HIGHWAY SAFETY

**Mr Pat Hoy (Chatham-Kent Essex):** My question is to the Minister of Transportation. Last year, independent experts found the 401 from London to Windsor to be narrow, steep and unforgiving, that is, no place to recover from any kind of error. The fatality level on that stretch of highway has increased more than 1,500% in 13 months. Minister, your government is treating human tragedy with callous disregard. It is not a PR exercise for your government to once again massage public opinion with empty promises. It is a critical safety issue, and you must take action immediately.

As always, your government is long on promises and short on delivery. Five million dollars was promised to allow for some slight improvement in the hiring of 11 OPP officers to be dispatched through Chatham-Kent. The money has not come through and the OPP have been forced to put down their plans. The accident rate is not slowing down; in fact, it has almost doubled since your inadequate announcements in Chatham. It was too little and now it's too late. You announced immediate funding—

**The Speaker (Hon Gary Carr):** Order. I'm afraid the member's time is up on the question. It was a minute, I'm afraid, and I do have some people checking as well. I apologize, but the minute is up. Minister of Transportation?

**Hon David Turnbull (Minister of Transportation):** When we're dealing with human tragedy on the road, we all have to say that we all have to be part of the solution.

I want to point out that we have in fact redeployed police; they are in place and they're working. In the first two months of this year, some 1,250 speeding tickets were issued in this area compared with 700 last year. There were 19 accidents this year compared with 37 accidents last year.

In the few months we had before the winter season, when construction is not possible, we fully paved the outside shoulder of one third of the road between London



and Windsor. We will continue as soon as the construction season starts.

**The Speaker:** Order. The minister's time is up. Supplementary?

**Mr Hoy:** You announced immediate funding last September to hire more OPP officers and you trumpeted your promise in the Legislature day after day. In January, the Solicitor General promised at the funeral of an OPP officer killed on the 401 that the money would be released within days, yet we have heard repeated rumours that the money cannot be given out before the new fiscal year. This is a disgrace, Minister. There is a public campaign, spearheaded by accident victims, calling for your resignation. When are you going to step down?

**Hon Mr Turnbull:** I refer the question to the Solicitor General.

### LEGISLATIVE PAGES

**The Speaker (Hon Gary Carr):** Before we go to petitions, I'd like all the members to join me in welcoming the pages.

**Interjection:** Doesn't he get to answer?

**The Speaker:** That was the answer.

Alison Brohman, from Kitchener Centre; Jordyn Clark, from Durham; Lukas de Roo, from Lambton-Kent-Middlesex; Massimo De Simone, from Whitby-Ajax; Rowan Denny, from Simcoe-Grey; Claire Eamer, from Leeds-Grenville; Victoria Ferrara, from Erie-Lincoln; Joshua Hurwitz, from London North Centre; Nicholas Hwang, from Halton; Julia Ivory, from Willowdale; Margaret Kennedy, from Ottawa South; Derrick Leung, from Don Valley West; John Craig McEachnie, from Pickering-Ajax-Uxbridge; Timothy O'Mara, from Beaches-East York; Michael Patterson, from Mississauga Centre; Andrea Rubakovic, from Broadview-Greenwood; Danielle Tarrant, from Kenora-Rainy River; Shannon Tufts, from Hamilton West; Sean Turner, from Simcoe North; and Andrew Walker, from Kingston and the Islands.

I believe all members would like to join in welcoming these pages.

1550

### HIGHWAY SAFETY

**The Speaker (Hon Gary Carr):** Just very quickly, I apologize; I didn't realize. I thought the minister had sat down on that question. I didn't know he referred it. I thought that was the answer.

**Mr Sean G. Conway (Renfrew-Nipissing-Pembroke):** Are we not listening, Mr Speaker?

**The Speaker:** To tell you the truth, I was getting ready to do the pages' names and I did inadvertently miss it. I apologize. I will let the Solicitor General answer, and I apologize to the Minister of Transportation.

**Hon David H. Tsubouchi (Solicitor General):** Thank you, Mr Speaker. That would have been the fastest answer on record, I think.

At the time that the Minister of Transportation made his announcement, there were 16 temporary transfers in the OPP to deal with that particular issue. In the interim, as you can understand, there is a commitment to make 22 permanent, full-time police officers transferred in the area. We have to backfill the positions. That process is currently under way. That process will be completed very shortly.

To answer the member's question, immediately after the Minister of Transportation's commitment, 16 officers were pulled from other parts of the province to deal with that issue specifically. The police were on the job. If I could just state quickly, that particular area has on average about five blitzes a month, and each blitz results in hundreds of charges.

The OPP are on the job, will continue to be on the job. There is a commitment to have that transfer completed very shortly. It will be done. We have temporary officers there in the interim. They are doing the job, and I believe doing the job well.

### PETITIONS

#### SENIOR CITIZENS' HOUSING

**Mr Mario Sergio (York West):** I have a petition addressed to the Legislative Assembly of Ontario which I'd like to read.

"Whereas the seniors in Ontario are largely being forgotten by this government, with the vast majority of tax cuts benefiting large corporations and the most wealthy in our society; and

"Whereas due to the government's downloading of responsibility for property taxes to the municipalities, a heavier burden is being placed on seniors living in their own homes; and

"Whereas many seniors, because of their low pension income, are increasingly unable to afford the high cost of upkeep of their homes, prescription drugs and other user fees, and higher property taxes and are being forced to sell and move into high-priced rental accommodation; and

"Whereas the availability of affordable rental accommodation is becoming a serious problem for seniors since the elimination of rent controls and the provincial government's decision to stop building affordable housing for seniors; and

"Whereas the increasing burden on vulnerable seniors is unfair and unjust to seniors who sacrificed and paid taxes all their lives; and

"Whereas the provincial government has shown little interest in helping seniors remain in their homes in honour and dignity;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"The time has come to remove education levies from the property taxes of low-income seniors."

I concur with the intent of the petitioners, and I will affix my signature to it.

#### ADOPTION DISCLOSURE

**Ms Marilyn Churley (Broadview-Greenwood):** I have a bunch of petitions here to do with adoption secrecy.

"To the Legislative Assembly of Ontario:

"Whereas existing adoption secrecy legislation is outdated and unjust;

"Whereas Canada has ratified standards of civil and human rights in the Charter of Rights and Freedoms, the UN Declaration of Human Rights, and the UN Convention on the Rights of the Child; these rights are denied to persons affected by secrecy provisions in adoption laws of the Child and Family Services Act and other acts in Ontario;

"Whereas 20% of persons in Ontario are directly or indirectly affected by restricted rights to personal information available to other citizens;

"Whereas the adopted person's right to his or her birth identity is rooted in a basic and fundamental human need;

"Whereas most birth parents did not ask for lifelong confidentiality; it was imposed on them involuntarily;

"Whereas research shows that not knowing basic personal information has harmed adopted persons, birth parents, adoptive parents and other birth relatives;

"Whereas research shows that access to adoption information does not cause harm;

"Whereas research shows that unqualified access to information in adoption satisfies the overwhelming majority of the parties involved;

"We, the undersigned, petition the Legislature of Ontario to enact revision of the Child and Family Services Act and other acts to:

"Permit unrestricted access to full personal identifying birth information to adopted persons and adult children of adopted persons; and unrestricted access to the adopted person's amended birth certificate to birth parents, birth grandparents and siblings and other birth relatives, when the adopted person reaches age 18;

"Permit unrestricted access to identifying information to adoptive parents of minor children, emancipated minor adoptees and individuals with legal guardianship for an adopted person in special circumstances;

"Allow adopted persons and birth relatives to file a notice stating their wish for no contact;

"Replace mandatory reunion counselling with optional counselling;

"Permit access to agency and court files when original statistical information is insufficient for identification of and contact with birth relatives;

"Recognize open adoptions in the legislation."

I will affix my signature to this petition.

#### HIGHWAY SAFETY

**Mr Steve Peters (Elgin-Middlesex-London):**

"Whereas the carnage and the tragedy continues on Highway 401 between London and Windsor; and

"Whereas traffic levels on all sections of Highway 401 continue to increase; and

"Whereas Canada's number one trade and travel route was designed in the 1950s for fewer vehicles and lighter trucks; and

"Whereas road funding is almost completely paid through vehicle permit and driver licensing fees;

"We, the undersigned members of the Canadian Automobile Association and other residents of Ontario, respectfully request the Legislative Assembly of Ontario to immediately upgrade Highway 401 to at least a six-lane highway, with full paved shoulders, rumble strips and centre median barriers; and

"We respectfully request that the Legislative Assembly place firm pressure on the federal government to invest its gasoline tax revenues in road safety improvements."

I gladly affix my signature to the petition.

#### HEALTH CARE FUNDING

**Mr David Christopherson (Hamilton West):**

"Whereas the Harris government has cut \$40 million from the budget of the Hamilton Health Sciences Corp, which has resulted in a health care crisis in Hamilton-Wentworth and left the HHSC with a \$40-million deficit; and

"Whereas the HHSC is now planning to downsize and cut back services at the Henderson General Hospital by converting the hospital to a daycare hospital with urgent care, rather than an emergency department; and

"Whereas this will have a serious impact on emergency services for the 200,000 residents of Hamilton Mountain, upper Stoney Creek, Glanbrook, Ancaster and other communities above the escarpment; and

"Whereas the mountain population is a rapidly growing community and deserves and needs a full-service hospital; and

"Whereas an ambulatory care centre is not an acceptable replacement for a 24-hour emergency ward; and

"Whereas it does not make sense to spend \$100 million for a new cancer centre rather than half that amount to expand existing facilities at the Henderson General Hospital; and

"Whereas Mike Harris said in February the Henderson would remain open for acute and cancer care;

"Therefore, we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That the Legislative Assembly of Ontario direct the Harris government to restore the funding cuts to the Hamilton Health Sciences Corp and develop long-term solutions for the maintenance of appropriate acute care services at the Henderson Hospital to serve the needs of



the growing population of Hamilton-Wentworth and central south Ontario."

As I agree entirely with the constituents in Hamilton, I affix my name to this petition.

#### PRIX D'ESSENCE GASOLINE PRICES

**M. Jean-Marc Lalonde (Glengarry-Prescott-Russell) :** Cette pétition est adressée à l'Assemblée législative de l'Ontario :

"Attendu que le prix des produits pétroliers a augmenté significativement dans les dernières six mois ;

"Whereas the Mike Harris government has done nothing to protect consumers and is afraid to take on big oil companies;

"Attendu que le marché de vente en gros pour les produits pétroliers est contrôlé par un oligopole d'huile qui gère 85 % du marché de vente en gros ;

"Whereas the long-term increase in the price is mostly due to taxes that have doubled in the past decade;

"Attendu que le ministre fédéral des Finances, Paul Martin, est prêt à discuter avec les provinces afin de baisser les taxes sur l'essence ;

"We, the undersigned, petition the Legislature of Ontario as follows: that Mike Harris take initiative and lower provincial taxes on petroleum products.

"Nous, soussignés, adressons la demande suivante à l'Assemblée législative : que Mike Harris prenne initiative et baisse les taxes provinciales sur le prix des produits pétroliers."

J'appuie fortement cette pétition en y régistant ma signature.

**The Deputy Speaker (Mr Bert Johnson):** Pursuant to standing order 30(b), I'm required to interrupt the proceedings and immediately call orders of the day.

1600

#### ORDERS OF THE DAY

#### CHRISTOPHER'S LAW (SEX OFFENDER REGISTRY), 1999

#### LOI CHRISTOPHER DE 1999 SUR LE REGISTRE DES DÉLINQUANTS SEXUELS

**Hon David H. Tsubouchi (Solicitor General):** Notwithstanding standing order 77(b), I seek unanimous consent to call third reading of Bill 31, An Act, in memory of Christopher Stephenson, to establish and maintain a registry of sex offenders to protect children and communities.

**The Deputy Speaker (Mr Bert Johnson):** Is there consent? It is agreed.

**Hon Mr Tsubouchi:** I believe we have consent to split the debate time this afternoon equally amongst the three caucuses.

**The Deputy Speaker:** Is there consent to split the time between the three caucuses equally? It is agreed.

**Hon Mr Tsubouchi:** I'll be brief with the time I'm going to be speaking, so I can share that time with—  
*Interjection.*

**Hon Mr Tsubouchi:** Oh, sorry.

I move third reading of Bill 31, An Act, in memory of Christopher Stephenson, to establish and maintain a registry of sex offenders to protect children and communities.

**The Deputy Speaker:** Mr Tsubouchi has moved third reading of Bill 31.

**Hon Mr Tsubouchi:** As I said, I'll try to be brief with my remarks so my colleagues can comment on what I believe is a very important piece of legislation.

Just to share with the people of Ontario, there's a little bit of history here, if I might talk about that. This piece of legislation is named after Christopher Stephenson, a young boy who was molested and killed by a pedophile who was out on federal statutory release. The jury made a recommendation that there should be a national sex offender registry. This was about 10 years ago. Unfortunately, there has been a vacuum and no one has really stepped in to try to deal with this issue. That's why this government is bringing forward this bill at this time.

Is this ideal? I don't believe it is. I think ideally we should have a national sex offender registry. It's well known that sex offenders do move from place to place and certainly across borders as well. I believe that a lot of my provincial colleagues will certainly support us on this, but I don't think the ultimate solution would be to have each province bringing in separate pieces of legislation. Ideally, it should be one actual sex offender registry that the federal government does come forward with. Unfortunately, that wasn't forthcoming.

I'd like to take the opportunity as well to recognize the efforts of Jim and Anna Stephenson, the parents of Christopher Stephenson, who for the last 10 years have dedicated their lives and advocated on behalf of victims to try to get a sex offender registry established. I believe that as a result of their work, their dedication and their strength, this House, if and when this legislation is passed, will certainly recognize what had happened many years ago and will recognize that some good can come out of a very bad situation. It's unfortunate this happens from time to time. When we do bring in pieces of legislation as a result, whether it's the Sergeant Rick McDonald memorial bill, whether it's Christopher's Law, that sometimes when something very bad happens in the communities out there in the province of Ontario, we bring in something that hopefully will protect other people, other children, across the province.

I want to recognize as well that there's been a great deal of support from victims' organizations, the police community and the concerned public. A number of these organizations—CAVEAT, for example, which is a national anti-violence group, the Police Association of Ontario, the Ontario Association of Chiefs of Police, the OPP association, and even places like Samia, where the

city council passed a resolution asking for swift passage of this bill.

I believe all of us are concerned with public safety. At the end of the day, that's what we're concerned with. History has shown that many sex offenders do reoffend. That's why it's important for the police to have this important tool to keep track of sex offenders within communities.

I can only emphasize as well that I believe there has been a great failure on behalf of the federal government to step up to the plate here. They do have a responsibility, and many of us recognize the need to have this as a national program. But at the end of the day, public safety and the rights of victims are the priorities for this government.

We owe a great deal of thanks to people such as Jim and Anna Stephenson; to the police service, who really have advocated on behalf of the Stephensons and come forward in support of this bill; victims' groups; and to victims and victims' families as well, because they are the people who are affected by these things. We owe it to them, to the communities and to the victims and victims' families to swiftly enact a law that will protect our communities and our children from sexual predators.

**The Deputy Speaker:** I recognize the member for Brant.

**Mr Dave Levac (Brant):** Mr Speaker, welcome back. I'm sure you're here to get things going.

*Interjections.*

**Mr Levac:** Frank was on the switch. Sorry about that.

**Mr Frank Mazzilli (London-Fanshawe):** I just want to read a recommendation that—

*Failure of sound system*

—of Christopher Stephenson. "It is recommended that the Solicitor General of Canada, in conjunction with the Ontario Ministry of the Solicitor General, police and other appropriate bodies, establish a registry for convicted, dangerous, high-risk sexual offenders, and require each such offender to register with the police in the jurisdiction where the offender will reside or is residing. If a summary of this information could be kept in a central registry for access by local police, the Royal Canadian Mounted Police, and others, it could greatly assist the investigation and apprehension of sexual offenders."

That's how this process started over a decade ago. By introducing Bill 31, or Christopher's Law, for third reading, we move one step closer to fulfilling a major commitment that we made to the people of Ontario, and that is creating a province-wide sex offender registry, the first of its kind in Canada. It will certainly enhance public safety. It's appropriate that we've named Bill 31 after 11-year-old Christopher Stephenson, who was brutally assaulted and then murdered by a pedophile on federal statutory release.

I had the privilege of briefing Christopher's parents, Jim and Anna Stephenson, during the committee hearings on February 28. Mr and Mrs Stephenson and I were most impressed at the strong and continued interest expressed

by all parties in this process. We have made substantial progress since the introduction of the bill last December. This registry will mean that we finally have the sophisticated means to keep track of sexual offenders who prey on the most vulnerable people of any age in our communities.

The Stephensons have stressed that the legislation for a sex offender registry gives special meaning to their son's short life, but it will also be instrumental in preventing such tragedies in the future. This proposed registry will honour Christopher's memory. It will provide a strong measure of protection for those targeted by sexual predators. It will also be the culmination of 10 years of dedicated efforts on the part of Christopher's parents in getting action on this registry proposal.

**1610**

Since second reading, my colleagues and I have received overwhelming support from victims' rights organizations, police services and the concerned public. We've heard from organizations like CAVEAT, a national anti-violence group, from the Ontario Association of Chiefs of Police, and from the Ontario Police Association.

The city council in Sarnia passed a motion calling for swift passage of a sex offender registry.

We all share a primary objective to help protect our children and adults at risk, in public places, in schools or wherever they may be.

Our government is honouring its pledge to create safer communities by establishing this registry which will help Ontarians be safe. Of course we're disappointed with the federal Liberal government, which has ignored the need for a national registry. Given that vacuum, it is the duty of our government to set a vital precedent for our country by creating a registry that serves and protects our citizens and deters offenders.

As I've emphasized before, a provincial sex offender registry would provide our police services with the essential tools of investigation: the tool, namely, of knowing where offenders are in the community and a way of keeping track of their locations.

Local police already have the authority to use their discretion to notify residents and disclose names of offenders in the interest of public safety. Under this proposed legislation they would also be given the authority to arrest those who fail to comply with Christopher's Law.

When all is said and done, our government is acting to protect our vulnerable citizens because the federal government has failed to do so.

Under this law, both public safety and victims' rights are top priorities. Keeping track of offenders goes a long way in ensuring community protection and preventing tragedies. Quick passage of this bill sends a clear message that we in Ontario have zero tolerance for those who pose a dire threat to our communities and to our children.

In summary, we owe it to the Stephensons, to the victims and their families and to vulnerable people, to



police services and to every community in this province to swiftly enact a law that will serve as a major crime prevention and crime-fighting strategy in Ontario.

I am happy to say—and the Stephenson family was there through the entire hearings—that the Stephenson family is extremely pleased with all three parties in this House as to the support they received on this bill. We had some rather good debate on some amendments that were put forward, some that went into other jurisdictions and so on, but at the end of the day the will of all the members of the committee was to have some legislation that was enforceable in Ontario and for the greater good of all citizens.

These are some of the offences for which people would have to register with their local police service:

Sexual interference: That of course is with children under the age of 14, section 151 of the Criminal Code.

Invitation to sexual touching: Again that's with children under 14, section 152 of the Criminal Code.

Sexual exploitation: section 153 of the Criminal Code.

Incest: section 155 of the Criminal Code.

Bestiality: section 160 of the Criminal Code.

Child pornography: That is in section 163 of the Criminal Code. I'm sure you would want to know that, Mr Speaker.

Exposure involving children under the age of 14: section 173 of the Criminal Code.

Parent or guardian procuring sexual activity involving people under the age of 18: section 170 of the Criminal Code.

Sexual assault: section 271 of the Criminal Code.

Aggravated sexual assault: section 273 of the Criminal Code.

Those are the types of offences for which people who are convicted would have to register with their local police service. I know the member from Niagara fully supports people having to do that so that police services know the whereabouts of pedophiles in our communities who pose a threat to children. In a case where they are being sought out, if there's an investigation in their community, it certainly helps even in the process of elimination. In some cases, some of these offenders may not have done anything, yet a child goes missing in a community and the first thing you need to do is go through the process of elimination. If you know where the offender is, you can quickly eliminate that person as a potential suspect.

So those are a few of the initiatives here. Not only has our government looked at legislation to help police and communities, but to go along with the legislation you need to come up with financial resources in order to help communities adapt and be able to enforce the legislation. That is why we came up with the community policing partnership program, which is a five-year partnership between the province and municipalities to hire new front-line police officers. The government of Ontario is providing the funding for 50% of the salary costs of those police officers.

That has a profound impact in every community that I've gone to. In London, that's 30 new officers to be out on the street in order to either conduct investigations or be there on a proactive basis. This morning I was in the Woodstock area, where it was six officers, and in their community they are enormously grateful because, as the member from Niagara knows, after the social contract there were very few officers left on the street, most of whom had to go home because the police services could not afford to pay them. We've made a commitment to not only support police and Ontarians but support them through financial initiatives such as these 1,000 new police officers.

But that's not all. The Partners Against Crime program, which provides front-line policing and community crime prevention grants—there's an investment of \$2.1 million in 1998-99 for that. The Partners Against Crime front-line policing crime prevention program, which is funded through the proceeds of crime, allows all municipal police officers and the Ontario Provincial Police to apply for funds for front-line policing and community-focused crime prevention programs. There is approximately \$1.5 million available under that program.

How do you best use the resources of these programs to effect some change in Ontario and to benefit real people? Our government believes that in order to prevent crime, you must target criminals. Certainly what we continue hearing from the federal Liberals—because I do have to remind you that in this case the provincial Liberals support this legislation. But the federal Liberals, who have failed to act on any community safety initiatives, keep talking about education and helping people—helping people come out of parole, giving them rights, letting them out into the community after a short period of incarceration for very serious crimes. We believe that if you've committed a crime, the best way to prevent you from further committing any crimes is to serve your sentence, the entire sentence. That is why along with legislation like Christopher's Law comes funding for front-line policing and also come changes to parole to make it more difficult for serious offenders to get parole.

On that note, I thank you. I'm sharing my time with—let me just check here.

*Interjection.*

**The Deputy Speaker:** The Chair recognizes the member for Guelph-Wellington.

1620

**Mrs Brenda Elliott (Guelph-Wellington):** I rise today to speak in support of Bill 31, commonly known as Christopher's Law. This is a piece of legislation that I think speaks to the issue of leadership and, most importantly, to the issue of protecting the most vulnerable in our society, our children. When we come to this Legislature, many of us come as parents. We send our children off to school or to various community activities and we assume, quite frankly, that the world will unfold as it should, that our children will undertake their activities and will come home to us safe and sound to resume another day. As in

the case of the Stephenson family, of course, things went horribly wrong, and this act is established in memory of Christopher.

Establishing a sex offender registry is an important thing for Ontario. We will be the first province in Canada to have established such a registry. When I was sitting on the committee reviewing this legislation and hearing public presentations on this bill, I was startled that our federal Liberal government had not taken action on this. As my colleague Mr Mazzilli indicated, this legislation stems from a recommendation that a national registry be established. I refer, though, to a letter that was sent to the justice committee here in Ontario and signed by the Minister of Justice and Attorney General for Canada, Anne McLellan. In it, she indicates: "It is well within the provincial jurisdiction to create sex offender registries, and I believe this is the proper level of government to implement registries, given the ability of provinces and municipalities to adapt registry operations to local circumstances."

I found this surprising and disappointing, as did many of the presenters who came before our committee. Surely, when people are so mobile in our country—people can move from one jurisdiction to another—the best place to have established such a registry would have been nationally. The reason the federal government seems to have been reluctant to undertake a registry was that they turned to what is called the Canadian Police Information Centre, or CPIC, indicating that this is a national registry of information on criminal convictions that is available to police agencies across Canada.

Well, that is accurate, but what is not so readily known is that when someone undertakes to victimize a child in this heinous way, they are very often repeat offenders. This particular information centre database doesn't give accurate and up-to-date information for police. We were told in our committee that it's a matter of only a few hours if that perpetrator is to be found, and the child is to be safe. So time is of the essence, and having an accurate and up-to-date database is essential. That is what this registry will do.

This morning I had the pleasure of speaking to an organization of agricultural leaders, and they were talking about the issue of leadership. When I was researching my presentation for them this morning, I came upon this quote, which I thought fit what we are discussing this afternoon. It said: "Statesmanship is the art of changing a nation from what it is to what it ought to be." I would like to compliment our Solicitor General, the Premier and members of our government for taking it upon themselves to do what ought to be done and what should have been done by our federal Liberal government. It's interesting today that while the Premier was in the House, he was again taking the federal Liberals to task for their inability to come to the table and fully fund health care. Again, only 11 cents of every dollar is paid under a plan that was supposed to be 50-50—disappointing from the point of view of leadership. Here in Ontario we have not been afraid to provide that leadership, and if

this legislation is passed—and I believe it will be—this sex offender registry will establish us as leaders in Ontario and in Canada.

In our committee hearings we found that this is not a new thing. Although new to Canada and new to Ontario, in the United States a sex offender registry has been in place in some jurisdictions—in California, for instance—since 1947. In 1996 an act called the Wetterling Act, amended by Megan's Law, required all states to develop community notification systems. Now all the states and the District of Columbia have registries and notification systems in place. They have their own standards for determining when disclosure is necessary for public protection. But the interesting thing is that as a result of federal leadership by federal statutes, there are base standards in place for registration. The act was amended in 1998 to require states to participate in the national sex offender registry. How unfortunate that our federal Liberal government could not have taken that kind of leadership.

Here in Ontario we understand how important community safety is. My colleague indicated a number of community policing programs, of which we have been supportive. I know in my own community we have benefited from a number of these community policing initiatives, with more police officers and more local community safety programs. My community does appreciate them and does feel safer as a result of those initiatives.

What does this new law actually do? It requires sex offenders to register with their own local police service within 15 days of release from custody. That means that the police in our local communities would have the information on file of any sex offenders who are on probation or parole. Individuals whom the courts have determined to have committed sex offences but who receive absolute or conditional discharge would also be required to register. Police would have the power to arrest sex offenders who break this law. They would be able to obtain warrants electronically on short notice.

There are also requirements in this legislation that convicted sex offenders register their names and addresses with police in their communities and that they update this information on an annual basis or any time their address changes. This would be accessible to local police services. Under the Community Safety Act, the provincial government has given local police services the authority to disclose the names of sex offenders to protect the public.

This is not an easy topic to talk about. As my colleague read out the various offences to which this legislation would apply, I think it's fair to say that most or all of those topics make us very uncomfortable. But the fact is there are people in this world who are indeed predators. They victimize the most vulnerable, and they victimize our most innocent. If it isn't our government and our lawmakers who stand up to find ways to protect those individuals, who take the leadership to give tools to those who must act within our communities, then I ask, who would stand in defence of these poor innocents?



I'm very pleased to be part of a government that has taken the initiative to do this. Again, I regret that our federal cousins, the Liberal government, have not chosen to undertake this legislation. Almost every organization that spoke before our committee in support of this legislation expressed that same regret and indicated that if the federal Liberal government had been stronger on this, we would have a more strengthened system in place.

Nevertheless, we will be the leaders. We will continue to do what we know is right in the best interests of the children in our various jurisdictions. It's well known that sex offenders often present a significant risk of re-offending when they are released into the community. We hope that some of the anxieties resulting from their situation, knowing that they have to register, knowing the capability of the police to track them down very quickly, will be, most importantly, a deterrent to this type of crime happening in the future.

Again, my compliments to the Solicitor General for having the leadership to bring this legislation forward. I hope all members here in the House will join with me in supporting Bill 31, Christopher's Law.

**The Deputy Speaker:** The Chair recognizes the member for Mississauga East.

**Mr Carl DeFaria (Mississauga East):** I am pleased to stand today and participate in the debate on Bill 31, an act to set up a registry for sex offenders in Ontario. This act basically results from recommendations by the jury on the inquest into the death of Christopher Stephenson. These recommendations were made some time ago, in 1988, following the death of Christopher Stephenson, who was brutally murdered by a pedophile who was released from federal parole.

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At that time the recommendation from the jury was as follows:

"It is recommended that the Solicitor General of Canada, in conjunction with the Ontario Ministry of the Solicitor General, police and other appropriate bodies, establish a registry for convicted, dangerous, high-risk sexual offenders and require each such offender to register with the police in the jurisdiction where the offender will reside or is residing. If a summary of this information could be kept in a central registry for access by local police, the Royal Canadian Mounted Police and others, it would greatly assist the investigation and apprehension of sexual offenders."

As you can see, the recommendation was not just for the Ontario Ministry of the Solicitor General, but also for the Solicitor General of Canada to establish such a registry. I am pleased to stand up today with our government's move in the right direction, and I regret that the Solicitor General for Canada and the federal Liberal Party have not taken similar steps in this matter.

The reason I regret it is that our courts have recognized that sex offenders are very serious offenders. This is reflected in the records of the correctional services which show that 2,974 sex offenders are incarcerated in federal institutions and 21% of the total federal peniten-

tiary population on December 31, 1996, were sex offenders. It also shows that almost half of all federal inmates over the age of 55 are sex offenders. Sex offenders are more likely to receive prison terms. In 1997-98, 57% of those convicted of sex offences in Canada were sent to prison as compared to 38% of those convicted of other violent offences. Whereas 4,041 sexual offenders under federal jurisdiction on December 31, 1996, constituted 18% of the total offender population, 2,974 of those who were incarcerated, which is three quarters of those convicted, constituted 21% of the total incarcerated offender population.

The sentences sex offenders receive are longer than those given for other violent offences. In 1997-98, 37% of sentences given to sex offenders exceeded one year, whereas for other violent offences only 14% exceeded one year.

The reason I mention these statistics is to show how our society views the seriousness of sex offences. The proposed law, Bill 31, Christopher's Law, will go a long way in solving this problem.

I was privileged to be part of the committee that held hearings on this issue, and I was quite impressed with the submissions we received from all people and organizations that attended and made submissions. It was clear, especially from our police force, that this was a significant tool in their arsenal to follow up and prevent future offences.

Sex offenders often represent a significant risk of reoffending when they are released into the community. That's why we need a registry. The registry will also accommodate the police, who in the past had to rely on the CPIC, the Canadian Police Information Centre. But CPIC does not follow offenders who have completed their parole or their probation period. They would fall out of the system and would not be followed.

With the sex registry system, the police will be able to follow even people who have completed their sentence and their period of probation, because they will be required to register with their local police. They will be required to update that registration on a yearly basis. For those who fail to comply, there will be a penalty of up to \$25,000 or a maximum jail term of one year for the first offence and two years less a day for any subsequent offences.

The offences that will require registration are offences that most Canadians find abhorrent, and they would like to have individuals convicted of such offences to be monitored, such offences as sexual offences under section 151: invitation to sexual touching, sexual exploitation of victims between 14 and 17, incest, bestiality, child pornography, exposure, sexual assault, sexual assault with a weapon, threats to third persons of bodily harm involved in a sexual assault, and aggravated sexual assault.

When you take this in conjunction with other measures our government has taken for public safety, it's just one more arsenal to foster public safety in Ontario. Our government has moved in other directions such as

the community policing partnership program, which will see municipalities hire 1,000 new front-line police officers, and the partners against crime program, which has an investment in 1998-99 of \$2.1 million in prevention grants. Our government has indicated in this new session that child protection and public safety will be number one on our agenda for this new session.

I was quite impressed by the submissions made during the public hearings that we held on this issue, and particularly the submissions of the chief of police for Hamilton-Wentworth, who commended the law and indicated that the sex offender registry in Ontario will go a long way in solving re-commission of crimes, especially of course sex offences. He also indicated that he was quite disappointed that the federal government has not followed the lead of the Ontario government. He indicated that he has hopes that the federal government will follow this lead.

If the federal government does not follow the lead of Ontario, the other provinces will be claiming for some action from the federal government, because any sex offender will know that they are not welcome in Ontario. They will know that once they come to Ontario they will have to register and they will not be coming into this province; they'll probably be going elsewhere in Canada, and that will require the federal government to move on and issue a national sex offender registry. I hope that will happen very soon.

**Mr R. Gary Stewart (Peterborough):** I know I've only got a few minutes, but I am pleased to speak to Bill 31, this act in memory of Christopher Stephenson. I am going to speak for a moment just as a father and as a grandfather. Isn't it a shame that children over the years have had to die in this province before legislation like this is enacted? Isn't it a shame children have to be protected this way in our society today—a society that I believe has declined in morals, ethics, compassion and indeed in values—and isn't it a shame that we have to constantly enact legislation to protect our communities, our families, our youth? We as a government will protect the people of Ontario. Isn't it a shame that the federal government has not had the time or the initiative to do something about this type of situation? We will alleviate the fears of the families of this province and we will allow and make it safe for children to walk on the streets in this province.

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By enacting this particular bill, I believe it is very important that we know where these sex offenders are locating, whether they be in this province or indeed in this country, because they do have a knack, unfortunately, of repeatedly preying—and I want to emphasize that word—on the youth of our communities and indeed on the youth of province. We must know where these people are. We must have control of their movements. Certainly enacting either a fine or some of the other things that are going to be enacted in the bill, or indeed putting them back into jail again, hopefully will deter them from not registering as they are going to be required to do.

I want to compliment all the police services for their co-operation and their partnerships. I hope all of them—

**The Acting Speaker (Mr Michael A. Brown):** Thank you. Further debate?

**Mr Levac:** Mr Speaker, before I begin I'd just inform the House that my time will be split with the member from St Paul's and the member from St Catharines for the 40 minutes.

I want to start by reiterating my prayer and my sympathy to the Stephenson family. Prayer is ongoing; it never stops. To them I commit my continued prayers, and to those who have suffered as a result of this type of hideous crime I will add those people to my prayers as well.

I want to take a few moments to highlight some of the things that the Liberal Party under Dalton McGuinty has been indicating its willingness to do, but first to reinforce to the Solicitor General and to his parliamentary assistant from the beginning till now and until the final reading of this bill our undying support for the legislation. I know there have been offerings from the member from Niagara Centre to offer support, but I offer my hand as well, as I have done at the very beginning and will continue to do so. Co-operation in this House is not all that regular, but when it does happen, it's a proud moment for the children of this province, particularly in what we're trying to do here.

There are many, many more things to do, as he knows. He has indicated, I'm very pleased to say, a willingness to listen to some of the proposals that members on this side of the House have for the protection of children. Quite frankly, we cannot afford to allow any partisanship to take place and overrun our efforts. I know he has a heartfelt sincerity to ensure that our children are protected.

We want to make that message clear to the province of Ontario. To the members of the province of Ontario our children are sacred. They are our province, now and for the future. With those things being stated, I would like to offer just a review of some of the things I believe we need to start to look at.

Again, 100% support for the bill; the registry is a good first step, a piece of the puzzle, as we indicated earlier. Besides being in favour of the bill, the Ontario Liberals will fight to ensure that all of our communities are safe from crime, not just this particular hideous crime but all crime. We will make those efforts. A member on the other side had indicated that it's a shame that our society has become this way. I agree, but in reality—and we must step into reality—these crimes will continue. We must take steps to be proactive and to try to insist that we are prepared for when they do happen; not only do we know that they could happen, but that when they do happen we respond quickly to them and that we have that ability. That's what this bill does. It provides that weapon that the police need to act quickly and to make sure that if something's happening in our province that we don't want to have happen, the police, in their wisdom and their ability, have access to this technology that allows us



to say very quickly: "What's out there? Who's out there?" By having that ability, I'm telling you right now that it's going to be harder and harder for those perpetrators to perform those hideous acts.

I also want to say this: The federal government is responsible for ensuring that the entire country's safety is there. We should not allow a border to stop us from pursuing what we think is the best track to take, but again, I want to make this perfectly clear: It's a piece of the puzzle. If we get and when we get a national registry, it's a piece of the puzzle. We must provide, with every opportunity, those pieces of that puzzle to ensure that those kids can be as safe as they possibly can. That comes from educating the parents as to what to look out for, that comes from educating the schools as to what to look out for, the police officers as to what to look out for, and this Legislature as to what to look out for in terms of legislating smart laws that help stop the problem—actually, not even get in its way, because there are some opportunities for us to pass legislation that tends to get in the way of good law enforcement.

We want to take a look at the establishment of this registry as part of a question that needs to get asked. This was a promise made in 1995; we are now into the year 2000. It's a silly question, but the Premier was very quick in making sure that his priority, a bill to attack those squeegee kids, was passed very, very quickly. This is 1995 legislation that was talked about, the registry. We're now into the year 2000. I would say very clearly that Christopher's Law could have and should have been in existence since 1995—and, quite frankly, before that.

The other issue about the tragic death of Christopher Stephenson involves the supervision of offenders living in the community. The parole and probation officers have the highest caseloads in the country—117 cases to an average of 72. It's a very, very tough to do a job with a caseload of 117 to 1. If there's a drastic criticism of the federal government, it's not spending enough money to do the job, it's not agreeing to put a registry in place. So be it. Well, government, it's time for you to buck up. Make sure that the probation officers have got a good caseload so that they can do their job better. Are they at fault? Absolutely not. They're hamstrung right now. They don't have enough money being poured into the system that says that our priority is the children, because if probation monies were available, those caseloads would be lower and the chance of those people re-offending because of the supervision would diminish. So we need to take a very strong look at improving the probation officers' situation.

We also need to make sure that many sex offenders are already well known in their communities. As an example, the North Bay Nugget reported, after the initial introduction of the bill back in April 1999, that Jim Stephenson himself, Christopher's father, wasn't "certain that a registry would have saved his son's life. Only adequate law enforcement, parole services and rehabilitation provide maximum community safety."

I commend him for that heartfelt comment, simply because there's a man who went beyond the tragic death

of his own son and recognized, importantly, that this registry is simply a small tool, one piece of that puzzle. He recognized that those other pieces of the puzzle are still missing. We need to fill those holes quickly, and I challenge the government to do so as quickly as possible with some of the initiatives that are going to be presented by both the NDP and the Liberals. As I've said earlier, this is not about party issues; this is about the improvement of our system to safeguard our children.

Some of the initiatives that have been introduced that are known of, and I hope the Conservative government is doing some research—and quite frankly, on this side, if you introduce the bill, so be it. As long as we get that protection in place for those children, we will support it.

Safe school zones: It's not just the students in school who are causing problems around school; it's those strangers who are infiltrating with their drugs and weapons who need to be addressed. As part of 1999 election campaign, our leader put forward the idea of creating a safe school zone so that anybody found inside that school zone—anybody—with any kind of weapon or any kind of drugs will automatically result in a stiffer penalty. You can take that zone and expand it in any direction you want to protect those children and keep them away from the things that we're trying to say they shouldn't be having in the first place.

#### 1650

Project P: again, an opportunity for the Ontario government to put in some more money. We support greater funding for the Ontario Provincial Police Project P in the fight against child pornography—another link to that problem of the pedophile. Easy access to pornography, child pornography in that instance, is a catalyst to the problem. We need to have Project P beefed up to the best of our ability in this government.

Better mental health supports: We continue to argue that the province has the responsibility to ensure that nobody is released from any of our mental health institutions without ensuring that there is someplace for them to go and that they continue to receive the kind of supervision and care they need. It isn't that you are simply going to say to them, "You must take your medicine." That type of legislation doesn't work. You must put the programs in place and you must have the availability of the workers to ensure that those with mental illness will not re-offend if they are offending, because there's not always violence involved in that. But what it does is put pressure, for those who have committed any crimes, on to the case load of the probation officers who are watching, guardedly, those pedophiles.

We also support, very clearly, stronger victims' rights. Again, as the result of a lawsuit initiated by a victims' group, the Victims' Bill of Rights was long ago determined by an Ontario judge to be absolutely useless. Government lawyers in suits argued that they were simply making a statement of principle, denying that it confers any kind of rights. The lawyers for the Attorney General's office argued that the statute does not impose any obligation on any specific office or person within the

criminal justice system. Justice Gerald Day called the Ontario legislation flawed and toothless. So that's another piece of the puzzle that needs to be fixed and another piece of the puzzle that needs to complement the legislation that we're debating today.

I also want to point out very clearly that enough cannot be said about the Stephensons' efforts on behalf of their son and for all victims of a pedophile attack. To them I commend my support and, as I said earlier, my prayers, but also, importantly, pressuring the government to ensure (a) that this legislation passes, which it's going to, and (b) that other legislation gets enacted in order to supply what's necessary to stop this rage.

While the Premier was busy attacking squeegee kids in the final days of the session, we were still debating, and actually we are still debating today, this legislation, which I would assume and I'm going to presume everybody in the province thinks is a much more important piece of legislation than taking on 250 squeegee kids. Very much so. I would challenge anyone to stand up and say otherwise.

On this side of the House, we have a private member's bill from the member from Sudbury, who has the support of many groups, including our party. I know the party on the other side is quite aware of his legislation and have indicated a willingness to give it serious debate in passing. We also have from the Police Association of Ontario Bill Baxter indicating a very large support for the act to amend the Highway Traffic Act, which basically stops those johns out there from soliciting sex of prostitutes under 18 years of age. If enacted, it again speaks to this issue, is directly linked to this issue, and indeed will indicate to the OPP, the POA, research for development of psychology and our Toronto Police Association, care of Craig Bromell, that we're on side. We want this legislation.

In closing, I want to make it very clear that the Liberal Party wants to support the member. It most definitely supports the Solicitor General in this small piece of the puzzle. It's a significant piece of the puzzle. It's a piece of the puzzle that makes it loud and clear that we will not tolerate our children being abused in any way, shape or form. To him I offer my hand, and I offer him my congratulations for bringing forth this legislation regardless of whether he or any other member feels the federal government is not doing its job. My friend, this is a good start, because it could jump-start the federal government into saying we need a national registry. It's a positive step. I would only ask the government to say that as your example follows, so should your words. Your words should be based on positive reinforcement. Your words should be based on invitation. Your words should be based on initiating a grassroots movement that tells the federal government we believe it's time, we believe it's wanted and we believe it's needed.

**Mr Michael Bryant (St Paul's):** Of course we support this bill. I support this bill; the official opposition supports this bill. We have supported this bill for some time. It has been the subject of three throne speeches and

it has been the subject of discussion for over two years now. I'll speak to that in a moment. I do want to discuss what happened before the justice committee, but before I do that just a word about Bill 32, which was introduced the same day as this bill, Bill 31, by the member for Sudbury, Rick Bartolucci, who is here in the House, as he always is.

This is a private member's bill to amend the Highway Traffic Act to require a driver's licence to be suspended if a motor vehicle is used when purchasing sexual services from a child. It is another prong in the ongoing attack against sexual offences. It is a bill which has the support of the police, police chiefs and victims' groups. The member for Sudbury has received support from all across the province on this subject. I dare say this is a piece of pioneering legislation which deserves support from all sides, just as this bill, Christopher's Law, is receiving support from all sides of the House.

The reason I raise this is that it's very important for us at this moment, as we're debating Christopher's Law, to rededicate ourselves to the ongoing attack against sexual offences. There is not one bill or one approach that is going to work. We need to try all the approaches. Whether it comes from one side of the House or the other, I think it's important to get these bills passed as soon as possible. It's part of our rededication to the memory of Christopher Stephenson, to all the victims of sexual offences and their families. I certainly rededicated myself to this at the time of the justice committee hearings. I do so again. I call on all members of this House to do so not only tonight, but tomorrow and hereafter. That's the point of naming this bill after Christopher. I hope we're going to get the same kind of support for the member for Sudbury's bill.

This bill was the subject of some debate at the committee hearings. By and large the police associations, victims' rights groups, most of the groups that came before the committee supported the bill. Those that did not did so primarily on civil libertarian grounds. In other words, they said that the right to privacy for someone who was convicted of a sexual offence ought to trump the right to public access. I have to say I'm troubled by—and this is a predominant problem—this focus on rights talk. It's a peculiarly and particularly American phenomenon. That's because to some extent in the United States their Constitution guarantees the right to privacy. We don't have a guarantee to the right to privacy here in Canada. The difficulty with rights talk is that you end up having groups battling for their rights to subordinate or trump the rights of others. Along the way, it becomes a battle among various stakeholders.

In this case, it's pretty obvious that the rights to public access ought to prevail. But I like to think of the support of this bill as less about the triumph of the right to public access as the triumph of individual responsibility.

1700

Most of us dedicate ourselves as citizens in this province to conduct ourselves in a responsible manner. That means we certainly obey the existing laws and



regulations that are on the books, we obey the orders of the Speaker of the House as best we can and we otherwise take responsibility for ourselves, within our families, within our neighbourhoods and within the jobs we hold or the public service that we commit ourselves to.

Within our society people have rights. We know about that. Many of them are enshrined in the Charter of Rights and Freedoms. But we also have responsibilities. Those who are convicted of sexual offences may not be able to be locked up for good, but they do have to carry with them the stigma and the responsibility for that conviction and, for pedophiles, for the scourge that pedophilia is in our society. So when they go into a community, they have to let the community know they are moving into that community. This is reasonable and it's safe. I would say it is commonsensical, except that's become an unusual turn of phrase today.

What's important here is that the registry works. I think everybody on both sides of the House is committed to the registry working. There's a real concern that we don't want people's names ending up on that registry who ought not to be on the registry. Think about it: Can you imagine, if your name somehow ended up on that registry, what that would do to you in your community, to your reputation and to your life? We on the justice committee are confident that the safeguards will be in place to ensure that nobody who ought not end up on the registry will end up on the registry.

My concern with the bill has nothing to do with what is in the bill itself. The concern, again, is with respect to the priorities of this government. I have to say that while we normally endeavour to blow wind into the sails of government, I was quite willing to stand up here today and not discuss the shortcomings and the partisan prioritizing or lack thereof that took place, because really there is tripartisan support for this bill. But then I heard the government members stand up and start talking about who else? Who else do they talk about when it comes to issues of crime? It's these other politicians that you should be blaming about crime in Ontario. We heard more fed-bashing. We heard more talk about what another government is doing instead of what this government should be doing.

This government should have passed this bill earlier than it did. I can't believe anybody would suggest for a moment that the squeegee bill is more a priority to Ontarians than Christopher's Law. It's just not. Christopher's Law has been the subject of three throne speeches, and we have been discussing the bill for over two years. The squeegee bill was prioritized by this government and time allocation motions slammed through. The debate on that bill was limited, the time spent before committee was limited and this useless squeegee bill ended up passing before Christopher's Law.

I think the government would have to agree that those are mismanaged priorities, that the people of Ontario care more about ensuring that pedophiles fulfill their responsi-

bilities to their community by registering with their local community through the sex offender registry, than passing the sweep-it-under-the-rug act, which we already see is going to have no effect whatsoever.

Also with respect to bashing another government, there's a place for that and it's called Parliament Hill. When Prime Minister Klees wins his leadership race and is taking the mantle one day down the road, I can assure you that I will not stand in this House and whine about Prime Minister Klees, because my job is here in Ontario dealing with provincial matters. There is something called the official opposition up on capital hill. The official opposition has a critic, and I can assure you that the justice critic is there to blow wind into the sails of government. Our job here is to deal with Ontario provincial issues.

We did some digging on this. We looked at all of the press releases that have come out of the chief law officer, the person who the media have proclaimed Mr Law and Order, the Attorney General, and all the statements that the Attorney General has made in the House. What we found out was that more than 85% of the time that Mr Law and Order stands up in this House, he talks about squeegees or he blames other politicians for Ontario crime problems. When it comes to crime, I daresay that this government is all talk, no action.

Then we looked at the press releases, because of course we've been locked out of this House for all but one day in the year 2000. Maybe, we thought, the press releases and the media events would reflect more the priorities of Ontarians. What we found is that in fact more than 90% of the press releases coming out of that ministry dealt with either squeegees or blaming other politicians. Again, all talk, no action.

Now we get to this law, a fine example of a law which we are all supporting on this side of the House; however, a law which has been the discussion of three throne speeches, the discussion of significant debate and was subordinated in terms of a priority over the squeegee bill. Again, this government, when it comes to crime, appears to be all talk, no action.

I think most Ontarians care about in-your-face crime. I think most Ontarians are concerned about property crime to their homes, to their cars, vandalism, stolen goods. They're concerned about assaults. These are in-your-face crimes that people have to deal with in their day-to-day lives. What are we doing on this in-your-face crime? Right now, I haven't seen a single bill or a single statement from the government on these in-your-face crimes, and I would urge the government to look at the proposals that are out there. Rick Bartolucci's private member's bill is one example. We Liberals have proposed a five-point plan to curb gun violence and recoup its costs. We have also proposed that the budget for Project P in the OPP, as was already discussed, be substantially increased to deal with the demographics of this province. A handful of officers dealing with this problem is not a big enough commitment.

Domestic assault courts: There are lots of reannouncements by the government about a budget item from the previous administration, but I'm not seeing any courts being built. With respect to crown attorneys, again lots of reannouncements from this government on a budget line item matter, but what we're not seeing is any action.

We're about to see parental responsibility legislation. I haven't seen it yet, but as soon as I see it, if it squares with the media reports, there are some serious questions to be asked. For example, why is this legislation happening in 2000 when it was the subject of submissions to a House of Commons committee by the Attorney General under this government in 1996? Why has this government been talking about this legislation for years but not doing anything about it? Why is this legislation dealing only with petty crimes and not with the serious in-your-face crimes involving personal injury, involving break and enter? That's going to be more than the \$6,000 claims that can be launched in Small Claims Court. Why are they limiting it to petty crimes? These are important questions that will need to be answered by the government to refute this charge that in fact yet again, as with the squeegee bill, they are grandstanding and they are posturing. Again this government, when it comes to crime, is all talk, no action.

I only have a little time left so I'd like to finish by saying a few words about Christopher's Law and the victims of crime which this bill seeks to honour. Obviously the tragedy of the murder of Christopher Stephenson is a tragedy beyond description. This bill does honour his life, his memory and the lives and memories of other victims of crime.

As I said before the justice committee, I can't imagine for a moment what is going on in the minds of the Stephensons, who have ushered this bill along from day one. I'm sure it will be a bittersweet moment when this bill passes, and a moment when all of us, as I said before, can rededicate ourselves, I know I have, to stopping the scourge of sexual offences by supporting this bill, by supporting the member for Sudbury's bill, by doing everything we can to deal with the issue of the safety of our streets. It's a commitment of the Ontario Liberal Party, it's a commitment of this member and it's a commitment of the official opposition that we will continue to push along.

1710

**Mr James J. Bradley (St Catharines):** I'm pleased to contribute a few comments to this bill, which offers some promise on an issue that is very difficult for governments to deal with, and for the justice system to deal with in years gone by. I think most people are going to be in favour of this bill in principle. Certainly I am, and I commend the parents of Christopher Stephenson for the role they have played, the crusade they've been involved in, not only dealing with their own son's unfortunate circumstances but with children who might be placed in similar circumstances. They are to be commended for that, and I'm sure that is something all members of this House would agree with, without qualification.

With all pieces of legislation, I think it's important to note the level of financial commitment that goes with them. It reminds me of when governments constantly talk about tax cuts. When we talk about tax cuts, that means a diminishing of services. As long as people know that, I suppose that's a legitimate political choice to make. But in so many cases there is a suggestion out there that we can have these tax cuts, which continue to favour the wealthiest people in our society, and have services provided that all of us feel are important. Some of those services are associated with this bill. You need the resources to implement the bill. You need the resources to carry out the stipulations found in this bill. Unfortunately, in other cases, that has not been the situation that has existed.

We support the establishment of this registry, but many of us will ask why it took this period of time. The government was talking about this in 1995. We're now in the year 2000 and we're finally dealing with the bill. Yet we've had bills that are probably of less consequence. I think of the squeegee person bill. It's of less consequence than this bill. I would have preferred to see this bill passed some time ago. Be that as it may, as the lawyers say, I know this Legislature will give this bill speedy passage as we deal with third reading today.

The issue we have out there that must be looked at carefully involves the supervision of offenders living in the community. Our parole and probation officers have the highest caseloads in the entire country. The Harris government should be providing them with more resources so that offenders living in our neighbourhoods are fully supervised. That's what I mean when I talk about resources. A lot of people want to be tough on law and order, and I explain to them that to be really and genuinely tough on law and order you have to have the resources to fulfill the obligations contained within the legislation.

For instance, today on the streets of Ontario we have fewer front-line police people on the beat than when the NDP was in power. This government always likes to paint the NDP as not wanting to have a lot of police in our society. But when the NDP were in power, when they presided over this province, they had more police officers out there supervising this province, enforcing the laws of this province and acting in a preventive way than this government has today. We hear these lob-ball questions about the number of police officers, but when I talk to police officers in this province, a lot of them wonder where that new, net number of police happen to be, because they simply don't see them.

When you have legislation, it has to be meaningful. We all remember the previous Attorney General making a point about the victims' rights legislation he brought forward. Well, we found out that that legislation had next to no teeth and not the resources to make it effective. It was a good idea in concept, no question about it.

I can tell you from experience in my community, in talking to families of victims—and I think we all know a very famous case in our community. I would call it an



infamous case because of the nature of it: Paul Bernardo and Ms Homolka being involved in a crime against a young girl in our community by the name of Kristen French. I know the French family very well. I know what they have gone through. Though I can't experience it and say that I would know emotionally, having known the parents well and knowing the family well, I know the great difficulty they go through every time they have to go into court, every time they have to fight to prevent those awful tapes from being played in court. That's another thing they're asking for, that these tapes not be played in any future case for everybody in the courtroom. They're not asking that they be destroyed—though heaven knows they would love to see those tapes destroyed forever; they're a bad memory—but simply that if there is a court case or a legal proceeding which must use these tapes, we don't have an audience out there. I know it doesn't make the news media happy but the news media don't have to hear or see the tapes—because hearing is also an important component—nor others who line up in the gallery to be here for these cases. They understand that a jury or officers of the court may have to see those tapes, painful as it is. I know they want to find a way administratively or in a regulatory sense or in a legislative sense to bring that about, because it hasn't worked legally through the courts.

There is a case of families of victims who have had a very difficult time. I know all of us in the House, whenever you see that case come up yet again—I see Bernardo in court the other day. I don't usually talk about this publicly because I always feel it's an exploitation, but I get annoyed when I look publicly at this person showing up in court, looking for some kind of overturning of the case. I thought Rex Murphy on CBC, with a minute or a minute-and-a-half commentary, put it in the right context of how sick he was of seeing those two appearing in court, trying to change things around. If they'd just go away, people would be happy.

It's very difficult for victims, and we all know victims out there, families of victims, who carry this with them almost all their life. So when I look at that other bill, which was a bill dealing with victims' rights, long ago it was determined by an Ontario judge to be absolutely useless, according to the judge. Government lawyers in the suit argued that this is a statement of principle, denying that it confers any kind of rights. Lawyers for the Attorney General argued, "The statute does not impose an obligation on any specific office or person within the criminal justice system." Justice Gerald Day called the Ontario legislation "flawed and toothless." While it was a good statement of principle—and there was a lot of talk about it—if you talk to the families of victims, they will tell you that while it's better than a kick in the shins, it's not much better. It's a great statement but there aren't the resources, there aren't the teeth to enforce it.

My colleague Rick Bartolucci, the member for Sudbury, has two pieces of legislation that he wants to see passed and I think would receive the approval of this House, if brought forward. One is Bill 6, children

involved in prostitution, and Bill 32, An Act to amend the Highway Traffic Act to require a driver's licence to be suspended if a motor vehicle is used when purchasing sexual services from a child. He says there's total support around the province for both these bills. I know because he has conducted his consultations and I would agree that there's that kind of support.

We will support this bill this afternoon. It is not perfect, but it is a step, I believe, in the right direction. I urge the government to provide the necessary resources to be able to implement the provisions of this bill. We need far more people supervising these people who come out of the prison system. You have to know that someday they're going to be released from prison, unless they're in a life situation. When they come out they have to be carefully supervised by probation officers, if they're not going to prison and it's a probation sentence, or by parole officers if they're coming out of prison. Unless you have those people with the proper resources to supervise these people, then the bill isn't going to be as effective as it might be.

1720

I concur with the critic of the Solicitor General and the critic of the Attorney General of the official opposition, the Liberal Party, that for this bill to be as effective as it could be is going to require all of the necessary resources that will in fact require an expenditure and investment by this government, and I urge them to do so.

**The Acting Speaker:** Further debate? The member for Niagara Centre.

**Mr Peter Kormos (Niagara Centre):** Thank you, Speaker. First, if I may ask for unanimous consent to have the Speaker—that's you—put the question for third reading of this Bill 31 at the end of this afternoon's debate, and if a recorded vote is necessary, that it be deferred until tomorrow at the time for deferred votes.

**The Acting Speaker:** Mr Kormos has asked for unanimous consent to place the question this evening. If that happens and a recorded vote is necessary, that that be taken tomorrow during the time period for deferred votes. Do we have unanimous consent? Agreed.

**Mr Kormos:** I understand that by having done that I was accommodating somebody in the government benches. I find myself in a most peculiar position, but it is the first day back and I suppose I've used up my quota of largesse, of goodwill for the government.

New Democrats are going to support this bill, just as we supported it at first reading and just as we supported it on second reading.

I've been fascinated by the tone of the so-called debate this afternoon, because virtually every speaker to this point—not everyone but darned near everyone—has prefaced their comments by saying, "I don't want to be partisan about this bill." I know what that means. I'm not going to put to you that I don't want to be partisan about this bill. I think there are some very important considerations around Bill 31 that have to be part of this debate.

Again, I'll make it very clear. We support the sex offender registry. We made some very strong efforts during the course of second reading and then in committee to improve the bill, to make it better, to make it stronger, to make it more effective. We were frustrated in that regard. Fair enough. I understand that it's difficult to win those sorts of partisan battles even in the context of a bill that the government would say they are approaching from a very non-partisan point of view.

I couldn't help but note—and I'm sure people listening this afternoon couldn't—the clear effort on the part of the parliamentary assistant to try to politicize the issue and use it to do some federal Liberal bashing. Then my Liberal colleagues respond in kind, rise to the bait and do some Tory bashing. I'm in that wonderful position, I have the wonderful luxury of being a New Democrat, which means that I can go after both Harris and the Tories, as well as Chrétien and the Liberals, and point out the terrible shortcomings of both those parties and both those administrations.

**Mr Bradley:** What about Bob Rae?

**Mr Kormos:** I haven't attended any portrait hangings in the last year, and I'm looking forward to hangings in the future.

Bill 31 is an important piece of legislation. It has been cited by every speaker, every participant in the debate, that it reflects the recommendation of a coroner's jury, the recommendations they made during that inquest as a result of what must have been an incredibly painful exercise for that coroner, those jurors and, needless to say, the Stephenson family, an exercise so painful that I couldn't begin to imagine. There's nothing in my life experience, and I would suggest in most of our life experiences, that permits us to even come close to the incredibly intense pain that a family feels, that parents feel when a child is taken from them in a such a horrific and unspeakable way.

I was shocked during committee hearings to be told by Ontario Provincial Police sources that the life expectancy of a child who has been abducted by a sexual predator could be measured in mere hours. It was a shocking statistic, I think for all of us—mere hours, which means that the police have to be able to respond quickly, effectively and with all the possible tools available to them. It also means, Mr Parliamentary Assistant, that we have to have police out there to be able to do the job.

What I find disappointing is that there are fewer police per capita in this province today than there were in 1994. You can rely upon the statistics or you can go out there and talk to cops in any community in this province. Talk to police officers who are under incredible pressure and stress. Talk to victims of a recent bilking here in Toronto to whom the police had to say, not because the police wanted to, "I'm sorry, it's only a fraud." It was a multi-hundred-thousand-dollar fraud, but victims who went to the police some year and a half ago were told, "No, we can't prioritize this fraud, notwithstanding the size of it." You know as well as I do, Solicitor General, these victims retained their own investigator, Brian Patterson, a

very competent forensic investigator, who obviously was critical in the prosecution of that case, which resulted in a conviction.

So if you don't want to believe the statistics that are acquired and developed by non-partisan institutions like StatsCan, go out there, visit a police station, talk to the cops at any community in this province and they'll tell you about an incredible shortage of staffing, of person power, of police power. There simply aren't enough cops in the majority of our police forces to do the kind of job that those police want to be able to do.

I reflected again on the incredible pain that a family suffers, that a community suffers. Think for a minute about the incredible pain that police officers suffer when they find themselves so seriously understaffed that they can't do the job that they're sworn to do and that they very much want to do as professionals and as career law enforcement people.

The bill is going to pass. I'm extremely disappointed in this government for not having accepted the amendment that would have included sexual offenders under the age of 18 and therefore convicted, found guilty as young offenders. This government doesn't want them to be included in the registry. Please. This government also declined to entertain the most modest proposal of rolling this back 10 years. You see, what happens, Mr Parliamentary Assistant—I think you understand this; I think you know—is that only those persons who will be released from prison terms and/or convicted after the date of royal proclamation of this bill will be compelled to comply with the bill. What you've got out there is thousands and thousands of convicted sexual predators who won't be forced to comply with the bill, who won't be forced to register, and it will be a good number of years before the passage of time closes that gap. So already you've handicapped our police, because they've got the sexual offender registry, and then they also have to go into the pool of all those sex offenders who should have been in the registry but for your say-so, but who won't be. I find that incredibly frustrating in terms of what we expect our police officers to do, especially in these moments of incredible crisis, where speed is of the essence.

**1730**

I was very disappointed that this government didn't want to include young offenders and that this government didn't want to roll back the effective dates of the bill to include those convictions which occurred in the past 10 years, because all of the truisms say look, we know that the recidivism rate among sex offenders is incredibly high. That's a given. We know that although a huge number of sex offenders are in our federal institutions, which means sentences of two years-plus, there are still thousands in our provincial institutions where the maximum sentence is but two years less a day. These people are going to be out there on the streets in relatively short order.

This is what makes the registry important, but it's also important that the registry be as all-encompassing as



possible, which takes me to this, because it's impossible to talk about this bill and its passage without talking about what's happening to our prison system: our corrections system here in the province of Ontario, the process of privatization of corrections and the closure of institutions like the Ontario Correctional Institute up in Brampton, internationally acknowledged as having one of the most effective, if not the most effective, treatment programs for sexual offenders.

Don't forget, we're talking about people in provincial institutions who are going to serve a sentence of no more than two years less a day. These are people who are going to be back into the community, come hell or high water, yet this government plans to scuttle the treatment program at the Ontario Correctional Institute in Brampton, one that has drawn attention worldwide as being the most effective program to date in developing meaningful and real treatment for sex offenders—because the real goal here is to avoid the need to access the sex offender registry, isn't it? That's the real goal here. No more victims. You do that in one of two ways. You lock up perpetrators forever—it's an option—or you make sure, for that period of time in which they are in custody, they're getting meaningful treatment programs so that they don't reoffend. That's not rocket science; it's common sense.

Why this government doesn't want to focus on no more victims, in addition to ensuring that we can apprehend offenders at this fastest possible rate and in the most expeditious way quite frankly, leaves me bothered and concerned, because while it's one thing to say we've got a sex offender registry—we will have one, and I'll speak to that in a little bit—it's another thing to say the sex offender registry will only be useful in terms of apprehending offenders after they reoffend. That's when a police investigation commences, after a crime has been committed, not before a crime has been committed.

I say we've got to work on a much broader-based process, not only to ensure that we can apprehend offenders quickly and save the lives and the futures of young victims but that we develop systems and that we support systems like Ontario Correctional Institute and their treatment program. Do you understand? This government wants to shut down the treatment program for sex offenders at the Ontario Correctional Institute. It wants to shut the institution down. That, my friends, is nuts, and it's cruel, and it's short-sighted, and it invites more youthful victims. No fair-minded person in this province can accept the proposition that you would take one of the most successful, if not the most successful, treatment program internationally and shut it down. It's dumb. It's stupid. It's moronic. That fight will be ongoing as this government's orgy of privatization continues.

You didn't want to include young offenders. You didn't want to include adults who had been convicted and served their sentence prior to the enactment date of this legislation. I remember when I indicated in my address to this bill on second reading my desire to have public

hearings during the intersession—it's a long one. It's been at least three months, my goodness, that inter-session. Last year, 1999, we sat for, what, 40 days, Mr Marchese?

**Mr Rosario Marchese (Trinity-Spadina):** They don't want to work. I don't even remember.

**Mr Kormos:** Speaker, was it 40 days? In all of 1999 we sat for 40 days.

**Ms Marilyn Churley (Broadview-Greenwood):** How often was the Premier here?

**Mr Kormos:** I can't speak to a member's absence; you know that. The Speaker has ruled. Don't try to provoke me into commenting on Mr Harris's absence from the House, because I'll be ruled out of order, Ms Churley.

**Ms Churley:** I'm sorry. I forgot.

**Mr Kormos:** You of all people, as the Deputy Speaker, should have known not to do that. You're setting me up for a fall. I'm not going to comment on the Premier's absence, neither on his absence from the House nor his absence from the province. I wish he'd at least spend his money in Ontario. We have ski runs in Ontario. We have golf courses in Ontario. We have boating and fishing and hunting in Ontario. You don't have to go to Colorado or other southern foreign climes; you can spend your money in Ontario and keep Ontario jobs in Ontario.

**Mr Marchese:** But he wanted to escape the province, quite clearly.

**Mr Kormos:** That's not the issue.

The fact is that this registry will require adequate resources.

I go back to my suggestion, which was accepted, and I appreciate that—the Solicitor General accepted the proposition that there be hearings. They were very short hearings, weren't they? It was difficult, because of the time of the year and because of the absence of any widespread advertising about the hearings, to attract all of those people to the hearings who might have made a contribution, although there were some excellent contributions made. One of the things that we were unable to discuss because of the very abbreviated hearings was the funding and the costing of this.

Tell me if I'm wrong, Parliamentary Assistant. We understand that it's going to be administered by the Ontario Provincial Police. We understand that each local police force is going to have the responsibility to do the intake, I suppose, if that's what you call it, where the offender has to attend in that community where they have moved to and register, and then has to develop a system to relay that information on up to the Ontario Provincial Police, wherever their head office is, the head office of the sex offender registry.

These were the same people who have not been particularly kind to my private member's bill to facilitate access to police record searches by volunteer organizations. The argument is that it will cost so much money, it will be expensive for these police forces to provide this service. My response is that as a taxpayer I am prepared to invest money in our police services so

that they can provide criminal record clearances for potential volunteers for Big Brothers or minor hockey or whichever organization you may think of that is dealing with youthful people or vulnerable people or the aged. I am prepared to pay that as a taxpayer. Aren't you? If you're not prepared to pay that, are you prepared to share some of the price to the victims? Can you in any way absorb any of the cost that the victim absorbs once her or his life has been shattered? I say as a taxpayer that I'm prepared to invest in our police forces so they can guarantee that charitable and volunteer organizations have meaningful and speedy and free access to criminal record searches for volunteers. I'm prepared to make that investment because I think there's payback on that. I really do. But you see, one of the things we weren't able to discuss because you demonstrated—is it parsimony?

1740

**Mr Marchese:** Yes.

**Mr Kormos:** You demonstrated parsimony when it came to that sort of investment with respect to screening volunteers. We never got a chance, because it made me concerned about how thoroughly, how adequately, you are prepared to fund the sex offender registry process.

One of the comments—and this relies upon computer technology. I really wish we could have had more discussion about the status of CPIC nationally, the tool that police forces across the country use to access a whole pile of information, and about the fact that over the course of years it's degraded. There was a recent announcement of some money from the federal government in an effort to restore it, but there's also a strong suspicion that it doesn't come close to what's needed to make this CPIC system, this computer-based police information system, accurate and accessible to police officers across not just the province but the country.

I'm concerned, because if CPIC has fallen into a state of—I suppose it's not quite the family support plan office up in Downsview, but it's certainly headed in that direction. How then can we be assured of the effectiveness and adequacy of what is going to be built up in terms of input, storage and dissemination of information in this sex offender registry process? I'm very concerned about that. The last thing I want to see is this operation the subject matter of a Provincial Auditor's report.

We will be watching carefully, let me tell you, because my concern is that the design, the concept, is a perfectly legitimate one. It's a terribly important one. It gives the police yet one more tool in dealing with this very difficult area of investigation. But if it's underfunded, if it's as disorganized as some of the computer processes that Attorneys General in this province have implemented, then we are in serious trouble.

I was also concerned about the support for the immunity clause that was contained in the bill. You were there; you know what I'm talking about—this boilerplate clause that exempted or relieved the government or any of its officials or agents from any liability for screwing up. Just as this sex offender registry is a very powerful tool, its misuse or an inaccurate input of information can

be devastating. Notwithstanding my own civil libertarian bent, a very strong one, and notwithstanding my own enthusiasm for protection of privacy and freedom of information legislation, I'm prepared to stand and say, "Yes, there are certain people in our society, in our community, whose conduct puts them into a position where they have to forfeit some of those rights to privacy," in the case of sex offenders, with what we know about sex offenders, their propensity for recidivism and the terrible harm they do to young people—young or old people. Let's face it. We've obviously, because of the context of this bill, spent a lot of time addressing sexual predators, pedophiles, but we're talking about sex offenders right across the board here. We're talking about protecting children, protecting women and, yes, men too.

Think for a minute, Parliamentary Assistant. What could be more devastating than to be incorrectly identified as a sex offender, to have that information put out into a computer world with all of its—what are these things—hyperlinks and all those kinds of things where you click and you run your mouse here and run your mouse there? What could be more devastating? Just as I'm prepared to stand as a civil libertarian and say that, yes, we need this registry to give police the tools they need, I am also prepared to say this: When the government screws up, they should be liable. That's part of responsibility. That's the sort of responsibility you talk about fostering, right? Accountability, accept responsibility for what you do. But what did you do? No, you anticipated the kinds of foul-ups that could be incredibly damaging to a person's welfare, livelihood and reputation in his or her community—I'm talking about the inaccurate or false registration of an offender—and you've taken away from them the right to seek remedies for your negligence. I find it peculiar that a government that talks about accountability and accepting responsibility for screw-ups would want to exempt themselves and cover their behinds.

Again, we talked about this in committee, and I hope it never happens. But clearly, the purpose of that immunity section is because of your anticipation that it will happen, isn't it? That's why you put that section in there. You know there is a significant possibility of an erroneous registration. Let me tell you this: We will be watching this system. We will be auditing it on a daily basis. We will insist that offenders are accurately registered so that the police have the most accurate and broadest information pool—database. We've learned. How many family responsibility offices do we want or need?

Let me just mention this to you: I would ask you to check your own staff in your own constituency offices, because Family Responsibility Office foul-ups remain number one on our list. Payers who are legitimately paying are getting dinged because they're misidentified as non-payers. People whose responsibility to pay ended years ago are still being whacked because you couldn't get an iMac running in a computer store.

*Interjection.*

**Mr Kormos:** No, because we're talking about developing another huge computer database. I'm afraid



the analogy is quite appropriate, my friends. What frightens me is how badly you have mismanaged the Downsview family support plan and Family Responsibility Office, and the incredible harm that has done. I fear that if this sex offender registry system is mismanaged in even 1% of the same way you've screwed up the Family Responsibility Office, you're going to create some horrible grief, you're going to create some real tragedies. Look at how dangerous it will be to have sex offenders whose intake was done but who don't get accurately recorded. That, again, cripples the police when they're trying to do one of these speedy investigations. Also, look at the horrible cost you impose on an individual, who has never been convicted of any offence, who is inaccurately identified. So I caution you about something about which you had better be very cautious and careful. You had better be concerned about the level of investment.

**Ms Churley:** Can they take the government to court?

**Mr Kormos:** Well, no. You see, what happened, Ms Churley, is that the government included an immunity clause so they basically can't get sued for screwing up. They're obviously very conscious of the successful litigation by Jane Doe here in the city of Toronto, and very conscious of the family support plan and the Family Responsibility Office. So they included an immunity clause so they can't be sued for fouling up in this most serious of areas.

**Ms Churley:** So they can ruin somebody's life.

**Mr Kormos:** In any number of ways.

Talk to police officers and you will understand that they want to get the job done. My God, they want to get the job done, but they have to have the tools to do it. They applaud the sex offender registry, because it's going to help them speed up their identification of potential offenders in a given geographic area. They told you that life expectancy of a kid who is abducted by a sexual predator is but hours—very frightening stuff.

1750

But then I would put this to you: We know precious little about the process through the course of sentencing after conviction and on into corrections. We were provided with some modest information about people serving sentences in provincial institutions as well as federal. I want you people to understand this. The current parole legislation under the corrections act here in the province of Ontario, unlike the federal counterpart, provides for in camera, secret parole hearings. I have announced and we will be presenting shortly a piece of legislation that will amend the corrections act to provide for completely open and public parole processes here in Ontario.

I think it's critical that the victim has a right to know what arguments a parole claimant is making when she or he is seeking to have their sentence shortened or abbreviated. I think it's critical that the public know, that the press know. I think it's critical that these decisions be based on evidence that's recorded and that's publicly accessible, and that decisions be ultimately based on a pattern or process of precedent.

So I put it to the parliamentary assistant that I would expect, as I've given you my support for Bill 31—because it was the right thing to do, do you understand? I supported Bill 31 because it was the right thing to do. It was a Conservative bill but it could have come as readily from any one of the three caucuses here. Let me suggest to you that you should be supporting my private member's bill to open up parole hearings here in the province of Ontario because it's the right thing to do.

You should be advocating with your caucus colleagues to similarly lend their support to ensure that that private member's bill receives speedy second and third reading so that no longer in Ontario are parole hearings conducted behind closed doors, so that victims, communities and the public can understand what evidence or what information a parole board is taking into consideration before they deal with a parole claimant and they understand the reasons why a parole claimant is being released back into the community, effectively having their sentence shortened.

I want you to join with me, Mr Mazzilli, in calling upon your colleagues in the Conservative caucus to ensure that the Ontario Correctional Institute stays open, stays public and that the incredibly valuable programs that take place there in terms of the treatment of sex offenders, among others, remain in place and indeed are built upon and enhanced.

Mr Mazzilli, I want you to do that because you're the parliamentary assistant to the Solicitor General and I believe you when you tell me that you have a strong commitment to public safety. I believe you; I take you at your word. But if you have that strong commitment to public safety, you'll support my private member's bill to make parole hearings open; you'll support my call to keep the Ontario Correctional Institute open at Brampton with the programs that take place there; and now that the sex offender registry is going to be law in a very short while, you'll impose upon your boss, the Solicitor General and tell him to encourage his staff, people right over there, Mr King, among others, bright people, capable people, staff who serve their bosses well and faithfully—some minions, others ambitious young people who in their own right some day will be sitting in this Parliament—to start looking at policy processes whereby we can include young offenders in the sex offender registry.

Because I don't buy the constitutionality. Give me a break. Horse feathers. You've never been shy before, that's never stopped you; it never bothered you. Your history of litigation around constitutional issues isn't particularly good. That's just the way it is. I understand that. I read the papers; I read some of these court judgments. Perhaps an FOI question to put is, how much in costs has this government had to pay to opposing parties in all the unsuccessful litigation this government's been involved in? But let the courts deal with the issue of constitutionality, because I'm telling you the people of this province want to be protected from sexual offenders whether they're adults or whether they're youthful, whether they're 19 or whether they're 17.

We know there are some serious problems around youthful offenders and the adequacy of treatment programs, problems that you aren't solving with your boot camps and your privatization, your for-profit, American-based Wackenhut Corrections Corp of America, what have you, making profits off corrections and doing it by having fewer and fewer staff, poorer-trained staff, lower-paid staff and a virtual absence of any meaningful rehabilitation or treatment programs for some of the most troubled people in our society and in our community.

That's not how you build public safety. You do it by committing yourself to no more victims, not just to speedy apprehension of the offender. When you're talking about offenders you're inevitably dealing after the fact and by then it's too late. Of course we've got to catch the offender and we've got to make sure she or he is locked up and dealt with as meaningfully as possible, but understand that when you're dealing with an offender you're also dealing with a victim. I challenge you to get your act together to start developing policy and programs that result in fewer victims, not just speedier apprehension of offenders.

You want to turf kids out of school for being violent? God bless. I don't think there's a single person in the Legislature or in the community who would disagree with your proposition that a violent kid shouldn't be in there with other kids, but you don't just turf them out on the street so that they're violent, disturbed, troubled and uneducated.

You want to make parents responsible for the misdeeds of their kids? OK, go ahead; you've got the power to do it. But restore some of those supports those families had historically to help them deal with troubled kids, with kids who suffer from any number of personality disorders and learning disabilities and other shortcomings and faults and flaws that, by God, are probably as common, if not more frequent, here than they are in the general population. Think about it. If you want to make parents culpable for what their kids do, go ahead, but put guidance counsellors back into schools. Put some of the special support programs for kids with any range of disorders and disabilities back into our schools and back into our public health system. Make

sure family and children's services is adequately funded. Make sure children's mental health, whether it's in Niagara region or in Toronto or northern Ontario or the east or west of this province, is adequately funded, so that kids are getting the effective treatment they need before they find themselves in front of the judge's dais and then locked away in one of your damn boot camps.

Let's start talking about fewer victims along with speedier apprehension of offenders. Let's start talking about community safety and building community safety with investments in the right places and with the right institutions and with the right people. Let's stop talking about beating up on people out there who are struggling, who find themselves assaulted over and over again by a government that applauds only wealth and corporate finessing.

You're going to have a sex offender registry, but please, my friends, make sure it's done right so that it works to save that kid's life or that woman's life and/or their future. Make sure you've gone beyond the mere public relations announcement. I heard all the hugging and the kissing and, "We're not partisan here and we're not partisan there." Somehow everybody wants to embrace. This place had the image of a bawdy house earlier this afternoon. It's more than just saying the right things about an issue that happens to have a great deal of public currency right now, and this does. I understand that. It goes beyond merely mouthing the words. You can't just talk the talk, you've got to walk the walk. Be prepared to invest in these things and we might have a safer community.

**The Acting Speaker:** By direction of the House, I will now put the question. Mr Tsubouchi has moved third reading of Bill 31, Christopher's Law.

Shall the motion carry?

All those in favour will say "aye."

All those opposed will say "nay."

In my opinion, the ayes have it.

There will be a division, according to my direction, immediately before oral question period tomorrow.

It being 6 of the clock, this House stands adjourned until 1:30 of the clock tomorrow afternoon.

*The House adjourned at 1801.*



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Arnott, Ted (PC)	Waterloo-Wellington	Parliamentary assistant to the Minister of Economic Development and Trade / adjoint parlementaire au ministre du Développement économique et du Commerce
<b>Baird, Hon / L'hon John R. (PC)</b>	Nepean-Carleton	Minister of Community and Social Services, minister responsible for francophone affairs / ministre des Services sociaux et communautaires, ministre délégué aux Affaires francophones
Barrett, Toby (PC)	Haldimand-Norfolk-Brant	Parliamentary assistant to the Minister of the Environment / adjoint parlementaire au ministre de l'Environnement
Bartolucci, Rick (L)	Sudbury	deputy opposition House leader / chef parlementaire adjoint de l'opposition
Beaubien, Marcel (PC)	Lambton-Kent-Middlesex	
Bisson, Gilles (ND)	Timmins-James Bay / Timmins-Baie James	
Bountrogianni, Marie (L)	Hamilton Mountain	
Boyer, Claudette (L)	Ottawa-Vanier	
Bradley, James J. (L)	St Catharines	
<b>Brown, Michael A. (L)</b>	Algoma-Manitoulin	First Deputy Chair of the Committee of the Whole House / Premier Vice-Président du Comité plénier de l'Assemblée législative
Bryant, Michael (L)	St Paul's	
Caplan, David (L)	Don Valley East / -Est	deputy opposition whip / whip adjoint de l'opposition
<b>Carr, Hon / L'hon Gary (PC)</b>	Oakville	Speaker / Président
Christopherson, David (ND)	Hamilton West / -Ouest	New Democratic Party House leader / chef parlementaire du Nouveau Parti démocratique
Chudleigh, Ted (PC)	Halton	Parliamentary assistant to the Minister of Natural Resources / adjoint parlementaire au ministre des Richesses naturelles
Churley, Marilyn (ND)	Broadview-Greenwood	chief New Democratic Party whip / whip en chef du Nouveau Parti démocratique
Clark, Brad (PC)	Stoney Creek	Parliamentary assistant to the Minister of Health and Long-Term Care, assistant deputy government whip / adjoint parlementaire à la ministre de la Santé et des Soins de longue durée, whip adjoint suppléant du gouvernement
Cleary, John C. (L)	Stormont-Dundas-Charlottenburgh	
<b>Clement, Hon / L'hon Tony (PC)</b>	Brampton West-Mississauga / Brampton-Ouest-Mississauga	Minister of Municipal Affairs and Housing / ministre des Affaires municipales et du Logement
Coburn, Brian (PC)	Carleton-Gloucester	Parliamentary assistant to the Minister of Municipal Affairs and Housing / adjoint parlementaire au ministre des Affaires municipales et du Logement
Colle, Mike (L)	Eglinton-Lawrence	
Conway, Sean G. (L)	Renfrew-Nipissing-Pembroke	
Cordiano, Joseph (L)	York South-Weston / York-Sud-Weston	
Crozier, Bruce (L)	Essex	
<b>Cunningham, Hon / L'hon Dianne (PC)</b>	London North Centre / London-Centre-Nord	Minister of Training, Colleges and Universities / ministre de la Formation et des Collèges et Universités
Curling, Alvin (L)	Scarborough-Rouge River	
DeFaria, Carl (PC)	Mississauga East / -Est	

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Di Cocco, Caroline (L)	Sarnia-Lambton	
Dombrowsky, Leona (L)	Hastings-Frontenac-Lennox and Addington	
Duncan, Dwight (L)	Windsor-St Clair	opposition House leader / chef parlementaire de l'opposition
Dunlop, Garfield (PC)	Simcoe North / -Nord	assistant deputy government whip / whip adjoint suppléant du gouvernement
<b>Ecker, Hon / L'hon Janet</b> (PC)	Pickering-Ajax-Uxbridge	Minister of Education / ministre de l'Éducation
Elliott, Brenda (PC)	Guelph-Wellington	Parliamentary assistant to the Minister of Citizenship, Culture and Recreation and minister responsible for seniors and women / adjointe parlementaire à la ministre des Affaires civiques, de la Culture et des Loisirs et ministre déléguée aux Affaires des personnes âgées et à la Condition féminine
<b>Eves, Hon / L'hon Ernie L.</b> (PC)	Parry Sound-Muskoka	Deputy Premier, Minister of Finance / vice-premier ministre, ministre des Finances
<b>Flaherty, Hon / L'hon Jim</b> (PC)	Whitby-Ajax	Attorney General, minister responsible for native affairs / procureur général, ministre délégué aux Affaires autochtones
Galt, Doug (PC)	Northumberland	Parliamentary assistant to the Minister of Agriculture, Food and Rural Affairs / adjoint parlementaire au ministre de l'Agriculture, de l'Alimentation et des Affaires rurales
Gerretsen, John (L)	Kingston and the Islands / Kingston et les îles	
Gilchrist, Steve (PC)	Scarborough East / -Est	
Gill, Raminder (PC)	Bramalea-Gore- Malton-Springdale	Parliamentary assistant to the Minister of Labour / adjoint parlementaire au ministre du Travail
Gravelle, Michael (L)	Thunder Bay-Superior North / -Nord	
Guzzo, Garry J. (PC)	Ottawa West-Nepean / Ottawa-Ouest-Nepean	
Hampton, Howard (ND)	Kenora-Rainy River	Leader of the New Democratic Party / chef du Nouveau Parti démocratique
<b>Hardeman, Hon / L'hon Ernie</b> (PC)	Oxford	Minister of Agriculture, Food and Rural Affairs / ministre de l'Agriculture, de l'Alimentation et des Affaires rurales
<b>Harris, Hon / L'hon Michael D.</b> (PC)	Nipissing	Premier and President of the Executive Council / premier ministre et président du Conseil exécutif
Hastings, John (PC)	Etobicoke North / -Nord	Parliamentary assistant to the Minister of Transportation / adjoint parlementaire au ministre des Transports
<b>Hodgson, Hon / L'hon Chris</b> (PC)	Haliburton-Victoria-Brock	Chair of the Management Board of Cabinet / président du Conseil de gestion
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<b>Jackson, Hon / L'hon Cameron</b> (PC)	Burlington	Minister of Tourism / ministre du Tourisme
<b>Johns, Hon / L'hon Helen</b> (PC)	Huron-Bruce	Minister of Citizenship, Culture and Recreation, minister responsible for seniors and women / ministre des Affaires civiques, de la Culture et des Loisirs, ministre déléguée aux Affaires des personnes âgées et à la Condition féminine
<b>Johnson, Bert</b> (PC)	Perth-Middlesex	Deputy Speaker and Chair of the Committee of the Whole House / Vice-Président de la Chambre et Président du Comité plénier de l'Assemblée législative
Kells, Morley (PC)	Etobicoke-Lakeshore	Parliamentary assistant to the Premier adjoint parlementaire au premier ministre
Kennedy, Gerard (L)	Parkdale-High Park	
<b>Klees, Hon / L'hon Frank</b> (PC)	Oak Ridges	Minister without Portfolio, chief government whip, deputy government House leader / ministre sans portefeuille, whip en chef du gouvernement, leader parlementaire adjoint
Kormos, Peter (ND)	Niagara Centre / -Centre	
Kwinter, Monte (L)	York Centre / -Centre	
Lalonde, Jean-Marc (L)	Glengarry-Prescott-Russell	
Lankin, Frances (ND)	Beaches-East York	
Levac, Dave (L)	Brant	



Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Marchese, Rosario (ND)	Trinity-Spadina	
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Martel, Shelley (ND)	Nickel Belt	
<b>Martin, Tony (ND)</b>	Sault Ste Marie	Second Deputy Chair of the Committee of the Whole House / Deuxième Vice-Président du Comité plénier de l'Assemblée législative
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Mazzilli, Frank (PC)	London-Fanshawe	Parliamentary assistant to the Solicitor General / adjoint parlementaire au solliciteur général
McGuinty, Dalton (L)	Ottawa South / -Sud	Leader of the Opposition / chef de l'opposition
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Molinari, Tina R. (PC)	Thornhill	Parliamentary assistant to the Minister of Training, Colleges and Universities / adjointe parlementaire à la ministre de la Formation et des Collèges et Universités
Munro, Julia (PC)	York North / -Nord	assistant deputy government whip / whip adjointe suppléante du gouvernement
Murdoch, Bill (PC)	Bruce-Grey	
Mushinski, Marilyn (PC)	Scarborough Centre / -Centre	
<b>Newman, Hon / L'hon Dan (PC)</b>	Scarborough Southwest / -Sud-Ouest	Minister of the Environment / ministre de l'Environnement
O'Toole, John R. (PC)	Durham	Parliamentary assistant to the Minister of Consumer and Commercial Relations / adjoint parlementaire au ministre de la Consommation et du Commerce
Ouellette, Jerry J. (PC)	Oshawa	Parliamentary assistant to the Minister of Northern Development and Mines / adjoint parlementaire au ministre du Développement du Nord et des Mines
<b>Palladini, Hon / L'hon Al (PC)</b>	Vaughan-King-Aurora	Minister of Economic Development and Trade / ministre du Développement économique et du Commerce
Parsons, Ernie (L)	Prince Edward-Hastings	
Patten, Richard (L)	Ottawa Centre / -Centre	
Peters, Steve (L)	Elgin-Middlesex-London	
Phillips, Gerry (L)	Scarborough-Agincourt	
Pupatello, Sandra (L)	Windsor West / -Ouest	
Ramsay, David (L)	Timiskaming-Cochrane	
<b>Runciman, Hon / L'hon Robert W. (PC)</b>	Leeds-Grenville	Minister of Consumer and Commercial Relations / ministre de la Consommation et du Commerce
Ruprecht, Tony (L)	Davenport	
<b>Sampson, Hon / L'hon Rob (PC)</b>	Mississauga Centre / -Centre	Minister of Correctional Services / ministre des Services correctionnels
Sergio, Mario (L)	York West / -Ouest	deputy opposition whip / whip adjoint de l'opposition
Smitherman, George (L)	Toronto Centre-Rosedale / Toronto-Centre-Rosedale	
<b>Snobelen, Hon / L'hon John (PC)</b>	Mississauga West / -Ouest	Minister of Natural Resources / ministre des Richesses naturelles
Spina, Joseph (PC)	Brampton Centre / -Centre	Parliamentary assistant to the Minister of Tourism / adjoint parlementaire au ministre du Tourisme
<b>Sterling, Hon / L'hon Norman W. (PC)</b>	Lanark-Carleton	Minister of Intergovernmental Affairs, government House leader / ministre des Affaires intergouvernementales, leader parlementaire du gouvernement
Stewart, R. Gary (PC)	Peterborough	
<b>Stockwell, Hon / L'hon Chris (PC)</b>	Etobicoke Centre / -Centre	Minister of Labour / ministre du Travail
Tascona, Joseph N. (PC)	Barrie-Simcoe-Bradford	Parliamentary assistant to the Minister of Education / adjoint parlementaire à la ministre de l'Éducation

<b>Member and Party / Député(e) et parti</b>	<b>Constituency / Circonscription</b>	<b>Other responsibilities / Autres responsabilités</b>
Tilson, David (PC)	Dufferin-Peel-Wellington-Grey	Parliamentary assistant to the Minister of Health and Long-Term Care / adjoint parlementaire à la ministre de la Santé et des Soins de longue durée
<b>Tsubouchi, Hon / L'hon David H. (PC)</b>	Markham	Solicitor General / solliciteur général
<b>Turnbull, Hon / L'hon David (PC)</b>	Don Valley West / -Ouest	Minister of Transportation / ministre des Transports
Wettlaufer, Wayne (PC)	Kitchener Centre / -Centre	deputy government whip / whip adjoint du gouvernement
<b>Wilson, Hon / L'hon Jim (PC)</b>	Simcoe-Grey	Minister of Energy, Science and Technology / ministre de l'Énergie, des Sciences et de la Technologie
<b>Witmer, Hon / L'hon Elizabeth (PC)</b>	Kitchener-Waterloo	Minister of Health and Long-Term Care / ministre de la Santé et des Soins de longue durée
Wood, Bob (PC)	London West / -Ouest	Parliamentary assistant to the Chair of the Management Board of Cabinet / adjoint parlementaire au président du Conseil de gestion
Young, David (PC)	Willowdale	Parliamentary assistant to the Minister of Finance / adjoint parlementaire au ministre des Finances
Wentworth-Burlington	Vacant	



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Garfield Dunlop, Raminder Gill, Pat Hoy,  
Frances Lankin, David Young  
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No. 36

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## Legislative Assembly of Ontario

First Session, 37<sup>th</sup> Parliament

## Assemblée législative de l'Ontario

Première session, 37<sup>e</sup> législature

# Official Report of Debates (Hansard)

# Journal des débats (Hansard)

Tuesday 4 April 2000

Mardi 4 avril 2000



Speaker  
Honourable Gary Carr

Président  
L'honorable Gary Carr

Clerk  
Claude L. DesRosiers

Greffier  
Claude L. DesRosiers

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## LEGISLATIVE ASSEMBLY OF ONTARIO

Tuesday 4 April 2000

## ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Mardi 4 avril 2000

*The House met at 1330.  
Prayers.*

### MEMBERS' STATEMENTS

#### HOSPITAL RESTRUCTURING

**Mr Rick Bartolucci (Sudbury):** I stand once again to tell Mike Harris that my community is 100% dissatisfied with his inexcusable underfunding of our hospital restructuring project and the associated capital construction and equipment costs. Five years ago, we were told restructuring would generate huge savings. How ironic it is that we are now faced with the largest fundraising event in Sudbury's history, the \$40-million-plus Heart and Soul Campaign.

It is unrealistic and unfair to foist this on Sudburians. In February, campaign organizers went before our regional council, which gave them \$5 million while rejecting the request for an additional \$23 million, saying that the Mike Harris government has to take responsibility for these costs.

Sudburians strongly oppose picking up this multi-million-dollar tab. Even Heart and Soul organizers have labelled this in part as "the campaign nobody wants" and are trying to bring in Jeopardy host and native Sudburian Alex Trebek to serve as its spokesman. I respect Gerry Loughheed Jr, Alan Katz and the rest of the campaign organizers who are looking for solutions to the Harris underfunding problem. However, with all due respect to them and Alex Trebek, our community does not only need Alex Trebek; we need Mike Harris to come to the table and to bring more money. Our local politicians and community leaders will be travelling to Queen's Park to ask for additional monies.

Mike Harris, take responsibility. Give us those additional dollars.

#### JESSE'S JOURNEY

**Mr Bob Wood (London West):** I rise today to give the Legislative Assembly a progress report on Jesse's Journey. In 1995, John Davidson pushed his son Jesse Davidson 3,300 kilometres across Ontario in a wheelchair to increase public awareness of Jesse's Duchenne muscular dystrophy and raised \$1.3 million for research into neuromuscular diseases.

In 1998 and 1999, with a large assist from family and volunteer support, John Davidson spent 10 months

walking 8,300 kilometres across Canada to raise more funds toward the creation of a \$10-million foundation for neuromuscular research. To date, Jesse's Journey: A Father's Tribute has progressed to the \$3-million mark.

Already the foundation has provided seed money to help create the Jesse Davidson Neuromuscular Disease Laboratory and the Neurological Research Group in partnership with the Ottawa Hospital Research Institute and the University of Ottawa.

On Friday, April 7, the foundation is promoting a London and Middlesex area casual day to raise funds, with over 800 businesses and both school boards participating.

I know all members will join with me in recognizing the contributions of two great Ontarians and Canadians, Jesse and John Davidson.

#### HIGHWAY SAFETY

**Mr Pat Hoy (Chatham-Kent Essex):** I have repeatedly called for photo radar as the safest, most immediate deterrent for Carnage Alley. We also need significant safety upgrades, not minor corrections, on this deadly stretch of the 401.

Thirty-three lives have been lost in 13 months, yet the Harris government refuses to do what is needed. It took six months of lobbying and a public call for Turnbull's resignation by victims before the government coughed up the money they promised. It's in the press. It seems that only the court of public opinion makes the government act. Ministry staff said they wanted to deliver the money sooner because it was a priority. Why didn't you? Who was stopping you? Is that how you treat priorities? It will take another six months before officers can start.

Now the damage control begins: Deflect attention; blame other governments. It's the Harris way. Mr Mazzilli said, "It's an area neglected by several governments." Nonsense. There were four deaths in 1997, two in 1998, but 33 deaths in the last 13 months. Take responsibility for once in your mandate. Five million dollars to upgrade 200 kilometres of substandard road is totally inadequate.

I have 5,000 replies to my questionnaire. They show great public support for photo radar and immediate action for centre median barriers, extra lanes, and paved, level shoulders on both sides. The CAA has also presented 8,000 safety petitions.

What is the cost of human life, Premier? How much public pressure will it take? How many more deaths before you listen?

## PENSION FUNDS

**Mr Gilles Bisson (Timmins-James Bay):** Yet another example where workers end up at the bottom of the list when it comes to questions of bankruptcy and when it comes to questions of pensions.

A number of constituents have come to my office over the last week or so. They have been receiving letters from a company by the name of Morneau Sobeco, which is the actuarial consultant for the Royal Oak pension. As all members in the House would know, the Royal Oak company went under back in 1999 and, as a result, all those workers have lost their jobs.

The tragedy continues. Here we are, less than a year later, and it turns out, as we knew, the former employer and owner of Royal Oak, Peggy Witte, along with Price Waterhouse, which managed that company through the whole bankruptcy procedure, did not make pension contributions to the workers' pension funds, and now we find ourselves in the situation where the workers have a pension fund that's not fully funded. Now we've got the actuarial consultants sending people letters saying, "Hey, surprise, surprise, your pension that you worked all your life for is being reduced by 25%."

I say to the government across the way, it's high time that we do something in order to correct this injustice. Far too often, workers such as we find at Royal Oak are in a situation where employers take contribution holidays or skip out of town and the workers get left holding the bag. I call on this government to work with the New Democratic caucus to introduce pension reform that guarantees the dollars put forward in these pension plans to workers, where those dollars should be.

## MICHAEL STARR

**Mr Jerry J. Ouellette (Oshawa):** I rise today to pay tribute to the passing of a man whose commitment to politics in Oshawa is legendary.

The Honourable Colonel Michael Starr, a Privy Council member, passed away on March 16 at Oshawa General Hospital in his 90th year. This was a man who had dined with the Queen on the royal yacht Britannia, a man who was asked to review his winter works program with John F. Kennedy in the White House. This is the man responsible for developing our current college system; a man whose past included audiences with the Pope, as well as being the former chair of the WCB, citizenship court judge, let alone mention the 16 years as a federal member of Parliament, seven of which were as the Minister of Labour, and five years as an alderman, followed by four years as the mayor of Oshawa. Mr Starr was Canada's first federal cabinet minister of a proud Ukrainian descent.

Politics is an interesting lifestyle, and sometimes achievements are seldom known, but one of the numerous ones Mike shared with me was when, in opposition, he turned to his leader at that time, Robert Stanfield, and declared, "There, I've just made you Prime Minister of

Canada," as Mike led a vote defeating the government of the day by one vote on the third reading of the budget bill.

Mr Starr is survived through daughter Joan and son-in-law Bob Nichol, grandsons Mike and Mark Nichol.

Dearly missed but never forgotten, the Honourable Colonel Michael Starr.

## HOSPITAL RESTRUCTURING

**Mrs Lyn McLeod (Thunder Bay-Atikokan):** One of the commitments of our publicly funded health care system is to provide a high quality of care as close to home as possible. Yet just last week a Brampton woman who was in premature labour had to be flown to Ottawa, 450 kilometres away, to give birth to her twins. There was no place for this woman in any hospital in the country's largest metropolitan area. Emergency rooms are still overcrowded, surgeries are being delayed or cancelled and a woman in premature labour has to go 450 kilometres from home to give birth.

The \$3-million taxpayer-paid government advertising campaign says that there's a plan for health care, but there has been no plan for hospitals—there have just been cuts. In fact, Toronto has fewer beds today than were supposed to be in place after the government finished shutting down its 10 hospitals, and there are more cuts ahead for hospitals across the province. Sunnybrook hospital is planning to close more beds, Timmins hospital is planning to lay off 32 full-time staff and Hamilton Health Sciences Centre is closing the Henderson hospital. Half the province's hospitals have been told to get rid of their deficits, and the ministry staff are telling them, "But you can't cut programs."

For months now, the Minister of Health has said there will be a new funding formula to fix the hospital deficit problems. But no formula will help unless there is new money. This government must stop putting Band-Aids where the bleeding is worst. It is time to reverse the cuts to Ontario's hospitals.

1340

## COMMUNITY POLICING

**Ms Marilyn Mushinski (Scarborough Centre):** Crime and justice are a major concern to my constituents in Scarborough Centre. There are few elements of the justice system that touch the everyday lives of our citizens as policing. That is why I am proud to have been able to present Chief Julian Fantino and the Toronto Police Service with a cheque for \$1,048,000 this morning, as part of the Mike Harris government's community policing partnership program. This money represents the province's portion of the cost of putting an additional 106 front-line police officers on the streets of Toronto. Many of those officers will find their way to my constituency in Scarborough. Some of the new officers will undoubtedly make their way to the new 43 division that Scarborough councillors David Soknacki and Bas Balkissoon have



fought so hard to get established. I'm proud to have been able to lend my voice to that project as well.

Since the program was introduced in 1998, the community policing partnership has contributed to the hiring of 539 front-line police officers to make Ontario's streets safer. Today's investment is just another example of the Mike Harris government's commitment to ensure that all law-abiding Ontarians feel safe on their streets, in their neighbourhoods and in their homes.

### CHURCH FIRE

**Mr Gerry Phillips (Scarborough-Agincourt):** On behalf of the Liberal caucus and I think all members of the Legislature, I want to express our sorrow to the Greek community as a result of the devastating fire yesterday at the Annunciation of the Virgin Mary Greek Orthodox Church.

To His Eminence Metropolitan Archbishop Sotirios, Mr Costas Menegakis, the president of the Greek Community of Metropolitan Toronto, and indeed all the members of Greek community, our deepest sympathy.

As Father Peter, the cathedral priest, said yesterday, "The church is the people, not the building." However, this loss of the building will be deeply felt.

We all know the strength of the Greek Orthodox Church and the Greek community of Toronto, and we know that literally out of these ashes will rise a spiritual centre again for the Greek Orthodox Church.

It was a significant loss yesterday for the Greek community as this magnificent building was virtually destroyed.

We were pleased to hear that tonight there will be a community meeting where the community leaders will come together to begin to plan, as I said earlier, to make certain that out of these ashes arises a spiritual centre once again for the Greek community.

To His Eminence Archbishop Sotirios and to the Greek community, our deepest sympathy. We know that with the strength of the community they will once again have a magnificent structure as a centre for their spiritual needs in the community.

### SCHOOL SAFETY

**Mr John O'Toole (Durham):** Last year in my riding I held a community forum and the topic was rights, responsibility and respect in our community.

This well-attended event featured a number of panellists including, of course, students and parents; students like Greg Koenderman, an OAC student, and parents like Donna Lucas-Astley, who is also on the Ontario Parent Council, as well as Durham Regional Police Inspector Ross Smith.

At this forum I heard a wide range of viewpoints and found there was support provincially for a defined code of conduct in our schools. Since then I have been reading the press and have had a large number of letters in support of a code of conduct.

Just recently, in an issue of Time magazine, I was shocked to learn that a six-year-old boy who shot his classmate a few weeks ago had a knife taken away from him the very morning of the shooting. I share the outrage of the woman who wrote this letter in Time who wondered why this boy had been allowed to stay in school after the knife had been discovered. Being an assistant principal, the author pointed out that her school has a strict discipline policy on possession of weapons that had led to the misadventure in the school.

I am pleased that our Premier and our Minister of Education have taken the important steps of bringing forward a province-wide code of conduct, and I am certain that not just my riding of Durham but the people of Ontario, and more importantly the students and teachers in our schools, will gain from this important initiative by this government to make our communities safer for people.

### SPEAKER'S RULING

**The Speaker (Hon Gary Carr):** On Tuesday, December 21, 1999, the member for Broadview-Greenwood rose on a point of privilege to bring to the attention of the House a letter written by the member for Halton to the three House leaders. The letter sought to rebut comments made by the member for Broadview-Greenwood about the way in which the standing committee on general government had selected a candidate for the position of Environmental Commissioner.

I have reflected on the submissions, together with the written notification, as well as the submissions of the government House leader.

In her submissions, the member for Broadview-Greenwood indicated that the letter attacked her integrity as a member, that it made allegations about her conduct and character, and that it was intimidating and threatening. The member took particular objection to a statement in the letter that expressed the hope that the Legislature and its members could, with the co-operation of the House leaders, find some way to "extract" from her an apology that the standing committee's candidate for that position deserved.

In response, let me say I can appreciate that, to some extent, the word "extract" implies the use of force. However, after reading and rereading the sentence containing that word, as well as the entire letter, I do not believe this letter seeks to intimidate. I say this for several reasons. First, it is important to note that the letter was written and authored by an honourable member of the House, not a non-member. Secondly, the letter does not suggest that the apology should be secured by anything other than legitimate means. Third, the letter does not suggest that some person or institution not associated with this House should seek to secure the apology; on the contrary, it suggests that the Legislature and its members should do that. Fourth, the member for Halton may have been argumentative in his view that the member for Broadview-Greenwood owes an apology to a prospective assembly

officer, but such a view does not in and of itself amount to a matter of privilege. In essence, what we have here is a disagreement between two members.

For these reasons, I find that a *prima facie* case of privilege has not been made out.

I want to thank the member for Broadview-Greenwood for her point.

**Ms Marilyn Churley (Broadview-Greenwood):** Mr Speaker, on a point of order—

**The Speaker:** Just so you know—and the member may have been here yesterday—in the first three months of the opening session we took a great deal of time going back on points of order. I have made my ruling. Can we very quickly get to the point of order, and if it has anything to do with this one, I will very quickly ask her to take her seat.

The member for Broadview-Greenwood.

**Ms Churley:** Mr Speaker, thank you very much for taking the time to rule on my point of privilege. I just want to make it clear that I'm not easily intimidated and none of the House leaders in this place is my boss. I just wanted to be very clear there.

**The Speaker:** I appreciate that.

## REPORTS BY COMMITTEES

### STANDING COMMITTEE ON PUBLIC ACCOUNTS

**Mr John Gerretsen (Kingston and the Islands):** I beg leave to present the 1998 annual report from the standing committee on public accounts and move the adoption of its recommendations.

**The Speaker (Hon Gary Carr):** Does the member wish to make a brief statement?

**Mr Gerretsen:** In February 1998 the committee members began the lengthy process of examining the report and held public hearings with the appropriate officials and staff from eight ministries. The report summarizes the committee's findings and also those of the auditor, and includes 19 specific recommendations. Five relate to the Ontario student assistance program, four deal with the Ministry of Health's public health activity, and the Ministry of the Attorney General's courts administration program is the subject of the remaining three. Many of the recommendations ask that the appropriate ministry report back to the committee as and when requested.

I would like to thank the members of the committee and the staff who worked on the production of the document. We also appreciate the work of the Provincial Auditor and his staff. The report, unfortunately, was not filed before the House recessed last spring. Like them, the committee wishes to ensure that the mechanisms are in place to guarantee economy, efficiency and accountability of government operations and the effectiveness of the programs in achieving their objectives.

**The Speaker:** Is it the pleasure of the House that the motion carry? Carried.

1350

## INTRODUCTION OF BILLS

### PARENTAL RESPONSIBILITY ACT, 2000

#### LOI DE 2000 SUR LA RESPONSABILITÉ PARENTALE

Mr Flaherty moved first reading of the following bill:

Bill 55, An Act to make parents responsible for wrongful acts intentionally committed by their children / *Projet de loi 55, Loi visant à rendre les pères et mères responsables des actes fautifs commis intentionnellement par leurs enfants.*

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry? Carried.

Just before the Attorney General makes a brief statement, there is a point of order.

**Mr Dwight Duncan (Windsor-St Clair):** Mr Speaker, on a point of order: We were already asked to carry a motion, and I believe we will get the bill and the compendium right now. Often we get it before we're expected to do that. I would ask the government, and you, Mr Speaker, to ensure that we at least get to look at the bill and the compendium before such time as we have to carry some item.

**Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader):** I believe it's normal practice in the House that once the bill is tabled, which is in effect what you do on first reading, it is given to the opposition with the compendium after that particular part of the procedure.

**The Speaker:** As the member will know, the standing orders are very clear in saying that the attachments will be tabled at the time the bill is introduced. That is being done now. I would assume the ministry will have the appropriate appendices as well.

The Attorney General for a short statement.

**Hon Jim Flaherty (Attorney General, minister responsible for native affairs):** Mr Speaker, I'll make a minister's statement in a moment.

### ONTARIO REALTY CORPORATION CLEAN UP ACT, 2000

#### LOI DE 2000 SUR L'ASSAINISSEMENT DE LA SOCIÉTÉ IMMOBILIÈRE DE L'ONTARIO

Mr Agostino moved first reading of the following bill:

Bill 56, An Act to amend the Capital Investment Plan Act, 1993 to ensure that the Ontario Realty Corporation awards contracts in a fair and public way / *Projet de loi 56, Loi modifiant la Loi de 1993 sur le plan d'investissement pour veiller à ce que la Société im-*



mobilière de l'Ontario accorde des contrats de façon équitable et transparente.

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry? Carried.

Does the member have a short statement?

**Mr Dominic Agostino (Hamilton East):** This bill will be debated for second reading in private members' business on April 13. It's a bill to frankly clean up the mess that is occurring at the ORC, and to put guidelines and conditions in that would stop the abuses and the fraud that are happening at the ORC today.

## STATEMENTS BY THE MINISTRY AND RESPONSES

### PARENTAL RESPONSIBILITY

**Hon Jim Flaherty (Attorney General, minister responsible for native affairs):** The people of Ontario want safe communities. Our government has already acted, and we're proposing to do more. We're working to help restore the time-honoured values of respect and responsibility.

A child shouldn't arrive at a playground to find broken equipment. Homeowners and tenants shouldn't arrive home to find that their personal possessions have been damaged or stolen. Merchants shouldn't have to start their workday cleaning graffiti off their storefronts and doors.

These are some examples of the almost 20,000 property-crime-related cases in young offenders court in Ontario in 1998.

As part of our commitment to community safety, we promised parental responsibility legislation in our throne speech and in the budget. We are delivering on that promise.

Earlier today I introduced the Parental Responsibility Act. If passed, it would hold parents financially responsible for the damage, loss or destruction of property intentionally caused by their children who are under 18 years of age.

Under the existing law, much of the onus for proving the case is placed on the victim. We think this is unfair.

The Parental Responsibility Act would shift more of the onus to parents and make it easier for victims of intentional property damage to get compensation of up to \$6,000 in Small Claims Court.

Some would suggest that property damage is inconsequential or that it is a victimless crime, but victims tell a different story. They tell you that they feel violated and that their security has been shattered. They are victims of crime and they deserve justice.

This bill responds to the concerns raised by people who took part in 70 public forums held across the province by the Ontario Crime Control Commission. Many people told the commission that parents should take a more active role in shaping the behaviour of their

children. Some concerned citizens representing community and business associations have joined us here today to lend support for this bill. I acknowledge their presence and thank them for taking the time to attend: Fred Chorley, executive director of the Mississauga Crime Prevention Association; Sharon Maloney, general counsel of the Retail Council of Canada; and Stu Auty, executive director of the Canadian Safe School Network.

As mentioned earlier, the people of Ontario and our government firmly believe in the values of respect and responsibility—respect for others, respect for the law and an understanding that actions have consequences. These are values that we must teach our children. We recognize that most parents do their best to raise law-abiding children. The Parental Responsibility Act is aimed at reinforcing the principles of respect and responsibility, values that help to make our communities safer for everyone.

**Mr Dave Levac (Brant):** On a point of order, Mr Speaker: Recognizing the minister's ability to acknowledge some people in the audience, which I do, I would like to bring attention to the House of Mr Joe Barnes, his board of directors and some of his clients to 2nd Avenue Lodge. They walked the 200 kilometres from Owen Sound to be here today to talk to the Minister of Health, so I thought I'd bring acknowledgement to our guests. Thank you very much for being here.

**The Speaker (Hon Gary Carr):** I thank the member, who will also know it's not a point of order.

Responses?

**Mr Michael Bryant (St Paul's):** I listened with interest to the comments of the minister. We will be debating this bill and seeing whether or not it's actually going to be harmful, useful or useless. We look forward to that debate.

I'm about to say something that sounds familiar: Ontarians care about the safety of their streets and personal security in their homes. The government would like to trademark that observation, but they can't.

In talking to Ontarians, they tell me that they care about in-your-face crimes: break and enters, car theft, assaults. These are the in-your-face crimes that Ontarians deal with in their day-to-day lives. Ontarians are also very concerned about a gun epidemic which is sweeping Ontario. One out of three homicides, one out of five suicides and one out of five robberies in this province involve a gun. We're the largest province in a nation in which gun violence costs us, in economic and health care costs, \$6 billion, according to an OMA study. We read every week, sometimes every day, about shootings in our neighbourhoods. So they're very concerned about in-your-face crimes and they're very concerned about the gun epidemic.

Ontario Liberals believe in solid, whole communities. Our focus is on the community, an individual's responsibility to the community and the government's responsibility to ensure that individuals are safe in their community. That's why for us, for the Liberals, crime is a top priority, because we care about the safety of our

communities. So too do we support, respect, laud and wish to push forward family responsibility and parental responsibility. Who wouldn't?

1400

With respect to the gun epidemic, Ontario Liberals have put forward a five-point plan to curb gun violence and recoup its costs. With respect to crime prevention, law enforcement and rehabilitation, it's our position that investments need to be made by government to ensure that all three components of our justice system work. In education, in First Step programs, in investments in the police, in investments in the crown, in stopping the court backlog and in investments in rehabilitation in our correctional facilities, this is our approach to how we're going to curb crime to provide for a safer community.

What has been the position of this government? I regret to report that with respect to guns, mainstream Toronto wants to curb gun violence and recoup its costs. Mainstream Toronto supports responsible gun use and responsible gun storage, as most gun owners do, but they also support reasonable gun control legislation that will avoid the suicides and accidents and guns getting into the wrong hands. That's where Ontario is. Unfortunately, this government is far to the right of the people of Ontario when it comes to the issue of guns. This government, I regret to report, is in the holster of the gun lobby, siding with the gun lobby in the courts and the Legislature, shilling for the gun lobby at fundraisers and in an NRA commercial that airs every week on your local cable station here in this province. We're with mainstream Ontario in trying to do something about guns. This government, for some reason, is in the holster of the gun lobby.

What else is this government doing about crime? I regret to report that after all the talk about crime by this government in the year 2000, it appears that when it comes to crime, this government is all talk and no action.

The squeegee bill somehow was going to send a message, and the squeegeers would drop their squeegees and pick up a briefcase and lead more productive lives. Of course it will not happen; it will not be so.

This act—and I'm shaking it right now. Ordinarily the pen is mightier than the sword, but not when it comes to crime. When it comes to crime, you need to make investments in crime prevention, in law enforcement and in rehabilitation. The concern with this bill is that the victims still have to go to court to recoup these costs. In fact, these are Small Claims Court matters. I don't know why we're limiting it to that, I don't know why we're repeating a Family Law Act provision, and I certainly don't know why we're helping our insurance companies make subrogated claims against parents.

I look forward to seeing whether or not this bill is just more of the same: more talk—

**The Speaker:** Order. The time is up. Responses?

**Mr Peter Kormos (Niagara Centre):** This announcement and this bill today expose how fraudulent this Attorney General's party's position on law and order and

on prevention of crime and on protection of victims certainly is.

This bill does nothing more than restate what was already expressed in section 68 of the Family Law Act which, I should tell you, was passed during the period of the NDP—Liberal accord in 1986, which clearly put the onus on parents of children who commit crimes, and not just against property but against the person. The Attorney General omits today any consideration of crimes against persons by young offenders or, for that matter, by any other offender. As well, the Attorney General knows, or he certainly ought to know, that his suggesting that somehow this creates a new presumption with respect to the defendant young offender is totally naive. He suggests that this bill somehow establishes that the conduct was intentional. There wouldn't be a conviction if the conduct wasn't intentional, whether it's in young offender court or in adult court. This Attorney General knows, or ought to know, that the long-standing principle in British common law applicable in our civil courts, in Small Claims Court and in General Division courts, through the maxim of *res ipsa loquitur*, establishes that presumption of intention in any event.

This bill does nothing to add to the current state of the law. This bill does nothing to change the status quo. This bill mocks victims and is part of a litany of that disdain for victims that this government has displayed since 1995. This government wants to talk about victims? Well, let it start talking about its Victims' Bill of Rights that this Attorney General's predecessor passed in this Legislature and which was condemned by the courts of this province as "not establishing any statutory rights for the victims of crime," and I quote Mr Justice Day. Mr Justice Day said, once again, "There are no rights provided for in the Victims' Bill of Rights."

This government's pattern at least has been consistent with respect to victims. This government wants to talk a big game about standing beside victims, yet in fact it has abandoned them over and over again and continues to do so with this bill. This government suggests that somehow it's changing the process. The fact is, victims of crimes could always litigate against the parents of youthful offenders when those parents were displaying negligence during the course of their counsel or supervision of their children.

The fact also remains that there are thousands of families out there who suffer dramatically from a wayward kid, from a child who has gone off the track. These families already are spending thousands and thousands of dollars of their own money; they're mortgaging their homes to set up kids with counsellors and in residential programs. These are the families who are finding themselves abandoned by this government, as more and more mental health programs for young people absolutely disappear from the face of our province, as public health programs and school programs that were designed to intervene in the lives of these very disturbed and troubled young kids are again being written off by this government in exchange for tax breaks for the very rich. This



government denies those families in crisis any support whatsoever and gives false hope to the victims of crime and ignores in this bill the victims of violent crime.

I'm not going to diminish, nor would anybody, the impact of property crime, of a break and enter, on a family or a homeowner or a resident in a home or apartment. But I tell you, Attorney General, for you to post huge blown-up pictures of broken, abandoned factory windows and somehow suggest that that's what people in our communities are afraid of is not only naive, it could be interpreted as less than candid by most of the population of the province of Ontario.

I'll tell you what we're going to do, because we will make suggestions to in fact enhance the rights of victims. We'll tell you, for victims of crime where there have been convictions in either young offender courts or in adult criminal courts, to waive Small Claims Court fees so that they don't have to pay out the \$150 or \$200 up front to proceed in Small Claims Court to collect a judgment that may never be enforceable when you're dealing with an impecunious defendant. We will insist that you enhance the support for our courts, and especially talk to some probation officers, Attorney General, and understand how stressed they are in trying to perform their job. We'll fight for victims, Attorney General. Will you listen?

## DEFERRED VOTES

### CHRISTOPHER'S LAW (SEX OFFENDER REGISTRY), 1999

#### LOI CHRISTOPHER DE 1999 SUR LE REGISTRE DES DÉLINQUANTS SEXUELS

Deferred vote on the motion for third reading of Bill 31, An Act, in memory of Christopher Stephenson, to establish and maintain a registry of sex offenders to protect children and communities / Projet de loi 31, Loi à la mémoire de Christopher Stephenson visant à créer et à tenir un registre des délinquants sexuels en vue de protéger les enfants et les collectivités.

**The Speaker (Hon Gary Carr):** Call in the members; it will be a five-minute bell.

*The division bells rang from 1408 to 1413.*

**The Speaker:** Will the members kindly take their seats for the vote.

All those in favour of the motion will please rise one at a time and be recognized by the Clerk.

#### Ayes

Agostino, Dominic  
Baird, John R.  
Barrett, Toby  
Bartolucci, Rick  
Beaubien, Marcel  
Bisson, Gilles

Ecker, Janet  
Elliott, Brenda  
Eves, Ernie L.  
Flaherty, Jim  
Galt, Doug  
Gerretsen, John

Maves, Bart  
Mazzilli, Frank  
McGuinity, Dalton  
McLeod, Lyn  
Molinari, Tina R.  
Munro, Julia

Bountrogianni, Marie  
Boyer, Claudette  
Bradley, James J.  
Brown, Michael A.  
Bryant, Michael  
Caplan, David  
Christopherson, David  
Chudleigh, Ted  
Churley, Marilyn  
Clark, Brad  
Cleary, John C.  
Clement, Tony  
Coburn, Brian  
Colle, Mike  
Conway, Sean G.  
Cordiano, Joseph  
Crozier, Bruce  
Cunningham, Dianne  
Curling, Alvin  
DeFania, Carl  
Di Cocco, Caroline  
Dombrowsky, Leona  
Duncan, Dwight  
Dunlop, Garfield  
Gill, Raminder  
Gravelle, Michael  
Guzzo, Garry J.  
Hampton, Howard  
Hardeman, Ernie  
Harris, Michael D.  
Hastings, John  
Hodgson, Chris  
Hoy, Pat  
Hudak, Tim  
Jackson, Cameron  
Johns, Helen  
Kells, Morley  
Klees, Frank  
Kormos, Peter  
Kwinter, Monte  
Lalonde, Jean-Marc  
Lankin, Frances  
Levac, David  
Marchese, Rosario  
Marland, Margaret  
Martel, Shelley  
Martin, Tony  
Martiniuk, Gerry

Mushinski, Manly  
Newman, Dan  
O'Toole, John  
Ouellette, Jerry J.  
Parsons, Ernie  
Peters, Steve  
Phillips, Gerry  
Pupatello, Sandra  
Runciman, Robert W.  
Ruprecht, Tony  
Sampson, Rob  
Sergio, Mario  
Snobelen, John  
Spina, Joseph  
Sterling, Norman W.  
Stewart, R. Gary  
Stockwell, Chris  
Tascona, Joseph N.  
Tilson, David  
Tsubouchi, David H.  
Wettlaufer, Wayne  
Wilson, Jim  
Witmer, Elizabeth  
Wood, Bob

**Clerk of the House (Mr Claude L. DesRosiers):** The ayes are 90; the nays are 0.

**The Speaker:** I declare the motion carried.

Be it resolved that the bill do now pass as in the motion.

The member for Broadview-Greenwood on a point of order.

**Ms Marilyn Churley (Broadview-Greenwood):** Unanimous consent, Mr Speaker. I'm asking all members to join me today in congratulating Premier Harris for putting together a longer streak so far this April than the Leafs, Raptors or Blue Jays, and for equalling his personal best in appearances. Two is nice, but let's—

**The Speaker:** Unanimous consent? I heard some noes.

## ORAL QUESTIONS

### ONTARIO REALTY CORP

**Mr Dalton McGuinty (Leader of the Opposition):** My questions today are for the Chair of Management Board.

I believe people should take responsibility for their actions, and today I want to speak to you about your actions in connection with some land deals in Ontario. In particular, on June 16, 1998, the Ontario government sold a piece of land in Brampton for \$1.27 million. Six days later, that property was flipped for \$3.92 million. That meant the taxpayers lost out on over \$2.5 million in connection with that deal alone. You were the Chair of Management Board at that time. You are responsible for land sales in Ontario. You failed to make sure the interests of taxpayers were protected. Tell us now why.

**Hon Chris Hodgson (Chair of the Management Board of Cabinet):** As the Leader of the Opposition is fully aware, myself, our ministry, and the board of directors of the Ontario Realty Corp have taken the

proper steps through the proper process. It's a government protocol. The first step they did was that the new team evaluated all the past transactions. They found some irregularities. They called in an audit. That audit had found some irregularities and asked the police to come in and review the files. He's fully aware of that. We've done the proper process. There's an investigation underway, and he knows full well that I can't comment on the specifics of an investigation.

**Mr McGuinty:** Minister, you approved this deal and other deals I'm going to talk about. I'm only asking questions today that Ontario taxpayers want me to put to you.

1420

Let's go on to the next deal. On March 29, 1999, the Ontario government sold land in Mississauga for \$1.92 million. In November, that parcel was flipped for \$4.39 million. From the speculator's perspective it was a flip, but from the taxpayers' perspective it was a flop. In that particular case, they lost out on \$2.4 million.

Again, you were the Chair of Management Board at the time, Minister, and, as such, you were responsible for land sales in Ontario. Again, you did not protect the interests of taxpayers. Once again I ask you, Minister, why did you not live up to your responsibilities and protect the interests of taxpayers?

**Hon Mr Hodgson:** I think the Leader of the Opposition is fully aware that I and the Management Board ministry as well as the board of directors of the Ontario Realty Corp are taking all the proper steps, according to government protocol, to get to the bottom of these issues. He also knows that I can't comment on the specifics, but he can rest assured that this organization in all its actions is working hard to make the Ontario Realty Corp act better for the people of Ontario in all its actions.

**Mr McGuinty:** Minister, if you are genuinely interested in providing some reassurance to the people of this province and Ontario taxpayers, you will tell us why this happened. It happened on your watch.

Here's another deal now. On March 3, 1999, you approved a sale of government property for \$5 million. According to industry standards, that property should have been sold for \$10 million. Here's the order in council approving that sale. It is signed by one Chris Hodgson, Chair of Management Board. It specifically says, "recommended by Chris Hodgson."

Again, Minister, I ask you on behalf of Ontario taxpayers, how could you let them be the butt end of a shortfall of \$10 million? And that's only in connection with three deals that we've uncovered to date. Why did you not stand up and protect the interests of Ontario taxpayers?

**Hon Mr Hodgson:** The Leader of the Opposition is making very specific allegations. If he's so convinced of that, he can mention those facts outside the House, where he doesn't have the immunity.

I can tell you—

*Interjections.*

**The Speaker (Hon Gary Carr):** Order. It's the members' question period. If the time runs down, they're not going to have the questions. I'm prepared to stay here as long as we need to.

The Chair of Management Board.

**Hon Mr Hodgson:** These are very important questions that the leader has asked. We're trying to get to the bottom of this in the most open and fair manner possible to all parties involved. We've followed the government protocol. When their senior management noticed irregularities of past transactions, the board of directors of the ORC called for an audit. That auditor asked for independent help with people with forensic accounting. When they found out that there were irregularities, they asked the police to review those files.

We're trying to be as open and as fair as we can be, and we have to follow the government protocol. If you have any specific allegations of any other wrongdoing, by all means—

**The Speaker:** The minister's time is up. New question.

**Mr McGuinty:** These questions are also for the same Chair of Management Board.

Minister, these are not allegations. They are just facts that I'm putting before you, facts that are well known to the public of Ontario. We're talking about land flips in very short order that have secured incredible profits for speculators. You have not stood up for the interests of Ontario taxpayers. These are not allegations; these are facts. That's what it's all about.

Today the police are looking to see if anyone should be going to jail. When we raised this matter with you in the past in this Legislature, you said everything was OK, that there was nothing wrong. Today we discover that on your watch there are three deals to date which have been brought to the light of day which show that clearly you have not stood up for the interests of Ontario taxpayers.

Again, Minister, I ask you on their behalf, why have you failed to protect their interests?

**Hon Mr Hodgson:** First of all, an investigation was conducted by the senior management team, which asked for independent auditors to come in. They noticed some irregularities, and they have asked the police to review the files. So on the facts you talk about, there is a review process going on and the proper process is being followed.

When you were talking about statements last fall, that was in regard to specific allegations, and at the time I asked your critic who asked the question, if he had any evidence, to please share it with us; we would like to get to the bottom of it to protect the taxpayers.

**Mr McGuinty:** What we're talking about here is a huge sum of money. The three deals I have talked about total 10 million lost taxpayer dollars. Do you know what that would have got us? Let's just take a look at health care for a minute. Ten million lost taxpayer dollars would have got us 800 cardiac surgery operations, 10,000 cataract surgeries for our seniors, 50,000 emergency patient



visits in our hospitals. That's what \$10 million is worth to Ontario taxpayers.

I ask you one more time, and I personally can't understand why you are going to allow yourself to be left swinging in the wind over this one: Why did you fail to protect the interests of taxpayers when it came to these land flips?

**Hon Mr Hodgson:** I don't have the luxury to be able to swing away with all the bombast and rhetoric that an opposition leader can. I have a responsibility to make sure we follow the proper process to get to the truth. The proper process is being followed, and I can repeat that for you. Last fall I was asked about a specific allegation—and you can read the Hansard. I asked you, if there were any specific allegations you knew about, to please share them with us. The opposition didn't come forward with anything. The senior management team conducted a review on past sales, and that has led to a process which is the proper process to get to the bottom of these matters.

I can assure you that the Ontario Realty Corp board of directors is doing a lot of things to change the policies and procedures that, going forward, will make the ORC operate in a way that will achieve better value for the taxpayers of this province.

**Mr McGuinty:** This really is not a very complicated matter. In the documents establishing the Ontario Realty Corp, it says, "The Ontario Realty Corp disposes of real property as the agent of the Management Board Secretariat." That's you. When it comes to selling these parcels of land, they have to be approved by order in council. You make the recommendation, you sign off on the deals. Ontario taxpayers have lost millions of dollars as a result of your failure to protect their interests.

It seems to me that you have two options today: You can either defend your decision to sell off Ontario land at rock-bottom prices, or you can resign. Those are your only two options. So I ask you now, which option will you avail yourself of today? Will you either defend these decisions, or will you resign?

**Hon Mr Hodgson:** I have a responsibility to make sure the proper processes are followed and that it's done in an open and accountable manner. If you are trying to prejudge this investigation, I don't have the liberty to do that. We have to follow proper procedure, and the proper procedures are being followed. An audit review process is going on, on all past transactions where there may be irregularities. The police have been called in, where the auditor found some irregularities, to review those files. In the fullness of time, those investigations will be thoroughly reviewed, and we'll get to the bottom of this. In the meantime I can assure you that the senior management team and the board of directors of the ORC have changed policies to try to make the organization more accountable and responsible, to make sure the taxpayers receive better value from this organization.

**Mr Dwight Duncan (Windsor-St Clair):** On a point of order, Mr Speaker: In the minister's response to the first question of the Leader of the Opposition, he referred

to a protocol of standards that apply in these cases. It is my understanding, according to the standing orders of the Legislature, that those protocols ought to be tabled with the Legislature. I wonder if you would ask—

**The Speaker:** We've been through this before in the first session. It is when it is being quoted from and being referred to continuously, and it was not in this case. But I will say this—and I will entertain another point of order—I have been very simple on this, very clear on that. So you are not going to be able to get up again on the same point of order. I have been very clear on this. The rules are there, and I will be listening. If, in fact, as occasions happen in this House, they do quote from them and do repeat them, then I will be asking the government to table them. He has not done that, but I assure the member that I am listening very carefully.

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**Mr Duncan:** A point of order on another matter, Mr Speaker: In your response to me last fall, you did not specify how many references would have to be made—

**The Speaker:** That is the same point of order. Would the member take his seat when I'm standing, please. Would the member please take his seat while I am standing. That is on the same point of order. I am not going to repeat it. We are very clear. What has happened in doing these points of order during question period—

*Interjections.*

**The Speaker:** Order. I warn the member, one more outburst and I will have to name him. One more outburst and I will name the member.

Continuing with the member of the third party.

## HEALTH CARE

**Mr Howard Hampton (Kenora-Rainy River):** My question is for the Premier. Yesterday and today the people of Ontario are watching you and the Liberals play a game of tag with our health care system. You say you'll have to see the Liberal chequebook before you can improve patients' access to doctors, to nurse practitioners and nurses. But before the recent Liberal budget, you were out there everywhere across Ontario not pleading for health care funding; you were pleading for tax cuts. Liberal backbenchers were out there doing the same thing, talking about tax cuts rather than health care.

Premier, the issue is this: Are you going to move now to make sure that family doctors, nurse practitioners and nurses are more available to the patients of Ontario, or are you going to continue to play tag with the Liberals over who should take the lead in health care?

**Hon Michael D. Harris (Premier):** Let me say that I think it is a good question and it's a timely question. The answer is yes, we are moving ahead with more nurses, with more nurse practitioners, with more doctors, with more specialists, with more equipment, with more home care. We are moving ahead with more primary care reform. We are moving ahead on all of those fronts.

Let me be very clear that I led the charge through two first ministers' conferences in advance of the last federal

budget. In both of them the number one priority we called for was health care: restoration of the \$4.2 billion cut from the health care funding. At the same time, there's no question we also called, because the surplus was so massive at the federal level, for tax cuts. Why? Because in addition to first quality health care, we also wanted jobs for Canadians all across this country.

**Mr Hampton:** I think out of that, Premier, we're clear on one thing: You and the Liberals, when it comes down to the crunch, favour tax cuts for the well-off over health care funding. That's the bottom line.

In your own government, you said five years ago that you were in favour of primary care reform. Yesterday you said that it costs too much. Premier, maybe you don't understand the concept. It costs more to send a patient to an emergency room than it costs for that patient to have access to a physician or a nurse practitioner. Making optimum use of the skills of nurse practitioners and nurses will save the health care system money. It costs more to treat a person after they've become ill than it costs to prevent them from becoming ill in the first place. That's what primary care reform is all about.

Premier, if you have a study that shows us that primary care reform is more—

**The Speaker (Hon Gary Carr):** Order. The member's time is up.

**Hon Mr Harris:** Let me first of all correct the record on a couple of statements that were part of the question. First of all, we have put health care funding first and foremost. We made up a \$1.7-billion cut to Ontario and then we added \$3 billion more. That's \$4.7 billion more into health care in our term of office than was being spent before.

Surely you, and whoever is nattering away beside you, appreciate the terrible mess you left us in, in health care, the terrible inaction that you and the Liberals left us with. You would know how difficult it was to make up not only \$3 billion of new money with a \$10-billion deficit, but in fact to make up \$1.7 billion worth of health cuts as well coming from the federal level. With regard to primary care before, I have not seen one study that says it costs less. I have seen—

**The Speaker:** Order. The Premier's time is up.

**Mr Hampton:** Premier, I accept that your government spent a lot of money laying off 10,000 nurses and then trying to figure out a way to hire them back, you spent a lot of money closing down hospitals and then deciding that you couldn't close them down, and you spent a lot of money shovelling more dollars into doctors' pockets without getting primary care reform.

I've heard you say you believe in primary care reform but that you want it to be voluntary. I've heard Mr McGuinty and the Liberals say, "We want primary care reform but we want it to be voluntary." You know, I know and the physicians know that it won't happen voluntarily. It's going to take some leadership. You know, I know and everybody else out there knows that primary care reform—making optimum use of the skills of nurse practitioners and nurses, moving doctors off fee-

for-service and on to salary—will save us money. Premier, when are you going to show some leadership on health care and stop passing the ball back and forth from the Liberals, who are in the same game that you're in?

**Hon Mr Harris:** Let me be very clear. You've defined the Liberals' position. They've had about eight on primary care that I've seen over the last little while. At one point they were in favour. At one point, two or three years ago, I heard Dalton McGuinty say, "We'd just order it." Now we hear him say that it should be voluntary.

Let me say that you at least have been consistent. You would just order it; you would just say to doctors, "We'll order you to do this." But here's the tragedy in that argument: You were in government for five years and you did nothing. You did nothing on nurse practitioners. This government, this Minister of Health, brought in the new legislation.

*Interjections.*

**The Speaker:** Order. Premier, take your seat.

I apologize. Is the Premier finished?

**Hon Mr Harris:** It was this government that brought in the seven pilot projects. It's this government that started teletriage services in northern Ontario and in the pilot projects. This government brought forward legislation on nurse practitioners. This government has now hired 220 nurse practitioners with \$50 million. You talk—

**The Speaker:** Order. The Premier's time is up. New question.

#### ONTARIO REALTY CORP

**Mr Howard Hampton (Kenora-Rainy River):** My next question is for the Chair of Management Board. All of the most controversial land deals at the Ontario Realty Corp, where the taxpayers of Ontario have been swindled out of millions of dollars, have happened while you were the minister in charge: the Joseph Chetti case in Brampton, the Frank Gabriele situation in Mississauga, the 145 Eastern Avenue deal. Minister, section 85 of the Ministry of Government Services Act says: "Any disposal by the minister or the Ontario Realty Corp of real property or an interest therein is subject to the approval of the Lieutenant Governor in Council." Minister, tell us, did you go to cabinet and recommend those deals? Because that's the only way they could get past cabinet. Did you go to cabinet and recommend those deals?

**Hon Chris Hodgson (Chair of the Management Board of Cabinet):** The member is fully aware, or he ought to be aware, that the proper steps are being taken according to proper processes when allegations that have been made are being reviewed. The senior management team of the ORC discovered some irregularities and they followed the proper process by asking for an audit to be conducted. That auditor needed assistance and asked for a forensic auditing outside team to take a look at it. They saw some irregularities and they've referred the matter to



the police to review. He knows that I can't comment on the specifics on any of these files that may or not be under investigation.

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**Mr Hampton:** Minister, this is a bit unbelievable. You try to say that you're fixing the problem, but the fact of the matter is that the three biggest swindles happened while you have been the minister. You say you've taken action. The only action I can see is that you got your twin, Mr Miele, who was fresh from selling off federal land in another swindle, to come and help you.

It boils down to this: You've presided over this. You've got to go. You can't sit here and claim that you're going to clean it up when you presided over it. As for your refusal to answer the question, it boils down to: Are you corrupt or are you merely incompetent?

**The Speaker (Hon Gary Carr):** Order. I would ask—

**Mr Hampton:** I withdraw.

*Interjections.*

**The Speaker:** Order. He has withdrawn it. I appreciate it.

**Mr Hampton:** Are you merely incompetent or do you have another problem?

**Hon Mr Hodgson:** I think anybody who is objective and has reviewed the facts in this matter would say that this is a government that's being open and accountable. We're the ones who supported the ORC's board of directors to start this review, and that has led to the police being called to review these transactions in the past.

Going forward, this new board, which was unanimously approved by this House and through their committee, appointed a new senior executive team that has brought in new policies and procedures to improve the way the Ontario Realty Corp conducts its business. Those policies will lead to a more open and accountable ORC, which will add to the value that organization brings to the taxpayers of this province.

**The Speaker:** New question.

**Mr Dominic Agostino (Hamilton East):** My question is to the same minister. Last fall, on November 4, we asked in the Legislature about allegations not only about the two deals that were in question at that time but specifically about any other allegations. Your answer was, "With respect to your question about any other allegation, the answer is 'no.'" That was on November 4.

Since that time we have seen a number of deals that are questionable, that are scandalous, and frankly they have defrauded the taxpayers of Ontario. You claimed in November and again in December in this Legislature that everything was fine, that everything was under control and that there were no problems with the ORC. Based on that, can you advise the House today on what date you or any of your staff were made aware of any irregularities at the Ontario Realty Corp?

**Hon Mr Hodgson:** For the record, on November 3 and 4, 1999, the member asked me to call for a police investigation into allegations of bid-rigging and corruption. He asked me if I was aware of those allegations. I told

him I was not aware of any specific allegations, which was true.

In December of last year, the president of the ORC brought to my attention the fact that, through the course of his due diligence and senior management's due diligence, he had discovered some irregularities that he wanted an independent body to review. What I was aware of at the time, in answer to the member's question, is that I had directed the ORC board of directors to put in place a sales process that is accountable, transparent and open to the public. It was through their due diligence that this proper process began. I also asked at the time if this member or anybody in his party had any information of specific allegations, and to this date I've heard none from that party.

**Mr Agostino:** I'm amazed at the fact that an audit was carried out over the summer and fall which showed irregularities. The minister wants us to believe that as minister in charge of the ORC, he was not made aware of any of these irregularities until December. You're telling us that an audit was carried out in the summer and fall and that you were only advised in December that there were irregularities at the Ontario Realty Corp.

Minister, the audit was in the fall. You claim you were told in December. You called in a forensic audit a day after the story broke in the media. Only at that time did you call the forensic auditors. You rejected our calls at that time for the OPP to come in, and the police were only called in at the end of March. That is a gap of anywhere from four to six months when the irregularities were first discovered. That can only lead one to believe there are two things here: either (a) incompetence at the ORC and incompetence on your part for not having this information, or (b) a political cover-up by the Ontario Realty Corp and by your staff and your office and your government.

Can you explain the gap, why it took so long for the police to—

**The Speaker:** Order. The member's time is up.

**Hon Mr Hodgson:** First of all, I disagree with the premise. It was a review by the senior management team and the president that uncovered some irregularities in past transactions that had taken place in the Ontario Realty Corp. That was in late fall. It was in December that they called for the audit, and this spring that auditor asked for assistance, for outside help. Those are the facts as I know them, and the proper process is being followed. We want to get to the bottom of this. If you have any specific allegations, by all means please share them. It would be helpful.

#### DRIVERS' LICENCES

**Mr Raminder Gill (Bramalea-Gore-Malton-Springdale):** My question is for the Minister of Transportation. Last fall, after your announcement that you were going to be taking immediate action to reduce the backlog and waiting time for road test exams that are required as part of your ministry's graduated licensing

system, you and I visited the John Rhodes examination centre in my riding to see at first hand the difficulties new drivers are having in obtaining their licences. We all know that the economy of Ontario is driven in large part by the automobile, and for many people in this province it's absolutely crucial that they are able to take these road test exams in a timely manner.

Minister, can you update us on what progress the ministry has made in reducing the waiting time for road tests?

**Hon David Turnbull (Minister of Transportation):** I'm very pleased to announce that province-wide the average wait time has been cut in half. The average wait time for G1 tests is now seven weeks and the average wait time for G2 tests is now 12 weeks. Saturday appointments have been made available, and now over 6,800 tests have occurred on Saturday. We have a province-wide toll-free number, 1-888-570-6110, and it is working well in advising people where the closest test date will be.

We have extended for one year the temporary licences which allow people to drive until the next available test. We have made 325,000 more tests available per year, almost—

**The Speaker (Hon Gary Carr):** Order. The minister's time is up.

**Mr Gill:** Thank you, Minister, for that update. I know the residents of my riding, in particular, will be interested to learn the update you provided on improving the road test backlog locally.

Minister, all Ontarians are concerned about the safety of the roads we drive on. Can you tell me, how does the graduated licensing system increase safety for Ontario motorists?

*Interjections.*

**Hon Mr Turnbull:** Pay attention; this is rather important.

Collisions for novice drivers are now down by 31% and fatality and injury rates are down by 24%.

We've brought in many other safety measures since we became the government: absolute liability offence for truck wheel separations, remedial measures for convicted drunk drivers, vehicle impoundment for suspended drivers who drive, increased fines for failure to stop for a stopped school bus and commercial vehicle impoundment. We now have the lowest number of fatalities since 1950. We are the fourth safest roads in the whole of North America.

#### ONTARIO REALTY CORP

**Mr Dominic Agostino (Hamilton East):** The question is for the Chair of Management Board. Minister, I want to go back again to when you were made aware of irregularities at the Ontario Realty Corp. These dates are important because these dates reflect ministerial accountability and ministerial responsibility for actions that have taken place.

You were asked on November 3 and 4 about irregularities or problems at the ORC. You claimed you did not know of any others at that point that had been brought to your attention. You claimed in your previous statement that you were made aware there was an audit ordered in December. Again, I go back: You said you were made aware in December. Can you provide to this House the specific date in December that you were made aware of the allegations and the date in December that the audit was ordered?

**Hon Chris Hodgson (Chair of the Management Board of Cabinet):** I don't have the exact dates. I can tell you it was late November when Tony Miele and the senior management team discovered some irregularities in past practices, and it was some point in December when the auditor from Management Board was retained. I can get that for you.

**Mr Agostino:** I would hope that now that the minister has the question, his staff or the minister can get back to us with the dates specifically when you or your staff were made aware and in regard to when the audit was called.

Let me quote from a letter of March 7 that you sent to Mr Mavrinac, the chair of the board of the Ontario Realty Corp:

"Over the summer and fall of 1999, as part of appropriate due diligence, the CEO began a review of sales transactions. In cases where concerns were noted, specific files were provided to the Management Board auditor for review in the fall of 1999."

Suggesting that late December refers to the fall of 1999 I think is stretching credibility and is simply trying to protect what you said in this House in November and on December 4. Very clearly, these problems were noted over the summer and fall of 1999.

1450

Minister, how can we believe that late December 1999, when you were advised that this audit had taken place, and in the letter that you sent—

**The Speaker (Hon Gary Carr):** Order. I'm afraid the member's time is up. Chair of Management Board.

**Hon Mr Hodgson:** There's absolutely no contradiction there. That shows the due diligence that I asked the ORC board to ask their senior management to do throughout the fall, to do a review of all past transactions. They spotted some irregularities in late November and they asked for an audit, and they took the proper process to do that. They have to have evidence.

We want to make sure that this organization acts in the best interests of the taxpayers of this province. This is part of their job and their due diligence, and they followed the proper action.

#### HEALTH CARE

**Mr Wayne Wetlaufer (Kitchener Centre):** I have a question for the Minister of Health and Long-Term Care. Minister, in the past week our government began a process of explaining to Ontarians through a media cam-



paign the realities of the federal Liberal government's declining contribution to health care.

Since 1995, the federal Liberal government's contribution has declined to the point where that government's contribution is now only 11% of health care costs. Ontario pays the remaining 89%.

Furthermore, the Ontario Liberals have stood idly by, never criticizing their federal cousins or even acknowledging that the federal cuts took place, all the while trying to deflect blame to us. The federal government has no plan for improving health care.

Last week you met with the country's health ministers and you outlined what Ontario was doing and what our plans were for improving health care. I wonder if you could share the information with us that you shared with them.

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** Yes. I'm pleased to say that last week, when I met with my provincial, territorial and federal colleagues, we had the opportunity to share with the federal government the tremendous innovation and reform that we were undertaking in this province without any support or leadership on the part of the federal government.

We spoke about the initiatives that we had undertaken in the way of primary care reform, that that had been a priority for this government since 1995, in order to ensure that people could have access to 24-hour-a-day, seven-day-a-week care by doctors, nurses and nurse practitioners.

We spoke about our expansion of 20,000 long-term-care beds to respond to the needs of our older population.

We spoke about the expansion of our home care and our community services, the provision of nursing, therapy, and other services in the community, and the fact that we were funding this—

**The Speaker (Hon Gary Carr):** Order. I'm afraid the minister's time is up.

**Mr Wettlaufer:** Minister, the Prime Minister's response was to launch a media campaign in an attempt to discredit you and hide the fact that they don't have a plan.

What was Allan Rock's response when you suggested what our plan was?

**Hon Mrs Witmer:** As we presented our plans for reform, for transformation, adaptation and innovation, the health minister politely listened. However, unfortunately we left the meeting with absolutely no additional funding, no indication of any plan that the federal government had for health care reform whatsoever. That was perhaps the most disappointing: that there was no direction and there was no vision on the part of the federal government, and they were unwilling to commit to work with us on our plans of reform and innovation.

#### CANADIAN FRANCHISE ASSOCIATION

**Mr Tony Martin (Sault Ste Marie):** My question is for the Minister of Consumer and Commercial Relations.

Minister, the Canadian Franchise Association, a very influential adviser to you and your staff on Bill 33, claims to be committed to fairness in franchising. But there are hundreds of franchisees out there who dare to differ, who say in fact the opposite is true.

The Canadian Franchise Association refused to accept a registered letter of complaint from Bulk Barn franchisees. When I tried to deliver it to the president of the CFA during the hearings in March, he returned the same letter. Today, I'm asking you if you would take a look at this letter and investigate the complaints of Bulk Barns and also investigate the actions of the CFA in this instance and how they stack up against the so-called code of ethics they keep talking about, both at the hearings and in an article today in the *Globe and Mail*.

**Hon Robert W. Runciman (Minister of Consumer and Commercial Relations):** I'm not aware of the specific concern the member raises, but I'll certainly be more than willing to take a look at the correspondence he has made reference to, follow up on it and get back to him in a timely way.

**Mr Martin:** I want to thank the minister for that commitment. You need to know, Minister, that there's a very troubling story brewing out there in Ontario. Today, we have with us in the gallery one Brenda Hope, a franchisee who has been treated terribly by a company called Chemwise. Her story was written up in the *Toronto Star* on the ides of March. The CFA has refused to look at her case. As a matter of fact, the CFA knew there was a problem with Chemwise a year ago and did nothing to correct it or to look into it so that people like Brenda Hope wouldn't become victims of that system and franchising here in Ontario. The CFA knows of her troubles. They know of troubles with a myriad of other systems in Ontario today.

Will you agree today to meet with Brenda Hope so that she might tell you her story and investigate her story, the Bulk Barn story that I presented to you by way of that registered letter and the Canadian Franchise Association so that—

**The Speaker (Hon Gary Carr):** Order. I'm afraid the member's time is up, unfortunately. Minister.

**Hon Mr Runciman:** I acknowledge the member's interest in this issue and appreciate his hard work. It's regrettable that his party didn't have the same degree of interest in this issue that he clearly has. This is the first government to move on this issue, on this initiative, only the second government in Canada. In fact, our legislation, as I'm sure if he wants to be fair he would acknowledge, is stronger than the legislation in Alberta in terms of protecting franchisees.

Certainly if someone has a concern, I'd be more than happy to hear that concern and to address it as best we can. But I don't want anyone to have an impression from this discussion that this government has not been committed to introducing and passing legislation that's going to protect franchisees in this province.

## GLOBAL WARMING

**Mr James J. Bradley (St Catharines):** I have a question for the Minister of the Environment. At a key meeting of environment and energy ministers in Vancouver last week, held to devise a federal-provincial agreement on climate change, Ontario, instead of providing leadership on the environment as it has in the past, was labelled as the chief obstacle to progress.

According to even normally cautious industry spokespersons, Ontario has taken an environmental posture that makes Ralph Klein look progressive. Your foot-dragging is so anti-environment that even the polluting industries are complaining about you. David MacInnis of the Canadian Association of Petroleum Producers said of your government, "Until the provincial government steps up and takes a leadership role, it's going to be tough to convince Ontarians to take global warming seriously." According to reports from the meeting, "Ontario Energy Minister Jim Wilson and Environment Minister Dan Newman spearheaded the opposition to any specific action."

Minister, why are you using discarded anti-environment rhetoric that even the big polluters have abandoned in your attempt to block any meaningful action on global warming?

**Hon Dan Newman (Minister of the Environment):** I want to thank the member opposite for his question. I also want to thank him for showing up at my swearing-in. I didn't even have to invite him and he still showed up, so I think he endorses my appointment as minister.

In Vancouver at the joint ministers' meeting on climate change, Ontario took a very active role. I want to tell the honourable member and all members here today what I did as environment minister. I emphasized how we needed to proceed with reducing greenhouse gas emissions through provincial action, and we're doing that in Ontario. I pushed to continue to lobby the federal government for a comprehensive and effective strategy on climate change, and I also pushed to require the federal government to respect provincial jurisdiction in responding to the climate change issue.

The member opposite mentioned today a story in the paper. That's what it was: a story. If he had read the story further, he would have seen that one of the conditions listed in the newspaper was the fact that there would be a 20% reduction in emissions. This government has reduced emissions by 40%. Why would we—

**The Speaker (Hon Gary Carr):** I'm afraid the minister's time is up.

**Mr Bradley:** The biggest single roadblock to making a deal on climate change in Ontario, according to Robert Hornung, climate change director for the Alberta-based Pembina Institute for Appropriate Development—he referred to Premier Mike Harris's government as "anti-environmental" and compared Ontario to some industrialized countries at the 1997 Kyoto conference, who were concerned mainly about the economic costs of taking action. Yet hundreds of business leaders at the

World Economic Forum in Davos, Switzerland, recently voted climate change as the greatest challenge facing the world at the beginning of this century. Some 200 scientists in 50 countries surveyed by the United Nations identified global warming as one of the top two most worrying problems for the new millennium.

Why, in the face of all the evidence of impending catastrophic environmental change that would result from global warming, are you and your government leading the charge against any significant action to head off this major problem? Why are you using yesterday's polluters' rhetoric and script to justify your dinosaur-like attitudes on the environment?

**Hon Mr Newman:** Nothing could be further from the truth. We took strong action in Vancouver at the joint ministers' meeting. In fact, federal environment minister David Anderson congratulated Ontario for the role that it played in reducing greenhouse gas emissions.

In Ontario, we have reduced greenhouse gas emissions and improved air quality with programs like the Drive Clean program, by our emissions reduction trading pilot program, Ontario's anti-smog action plan, by landfill management regulations and by our proposed environmental regulations for a new, competitive electricity market. We've taken strong action. Why won't the federal government?

## INTERNET

**Mr Ted Arnott (Waterloo-Wellington):** My question is to the Minister of Energy, Science and Technology. The Internet has generated a great deal of excitement around the world. Will the minister inform the House what the government has done to ensure that areas like Waterloo-Wellington and the rest of the province fully benefit from the developments in this electronic revolution?

**Hon Jim Wilson (Minister of Energy, Science and Technology):** I thank the member for Waterloo-Wellington for the question. The Ministry of Energy, Science and Technology has supported information highway initiatives since 1997 through the telecommunications access partnership program, TAP. TAP has assisted 35 projects involving over 300 partners, with a commitment of \$32.5 million toward projects exceeding \$100 million in total value. Two of these leading-edge information highway projects are located in Waterloo: the rural Waterloo community network and the Waterloo information network. Recently, the Minister of Natural Resources and I were in Waterloo to announce a new initiative to further advance the information highway in Ontario, called Connect Ontario. This SuperBuild initiative will invest \$82 million to connect 50 communities across Ontario. Connect Ontario will enhance the competitiveness of our communities in the new digital economy and spur growth in jobs, new investment and economic development opportunities. We are leading Canada, indeed we're leading North America, in Internet connectedness, a government record we are proud of.



**Mr Arnott:** I want to thank the minister for that response. I happen to know that this week he's celebrating his 37th birthday. I wish him a happy birthday as well.

Could the minister, by way of supplementary, inform the House on how Connect Ontario will work and how it will benefit the people of Ontario.

**Hon Mr Wilson:** Thank you for that enlightening piece of information. If I'm celebrating my 37th, then in four days the honourable member is celebrating his 37th.

Connect Ontario will invest \$50 million in broad-based partnerships to create a high-tech network of 50 connected smart communities across Ontario. An additional \$32-million component called GeoSmart will make land-related geospatial information available to and usable by connected smart communities. GeoSmart will integrate land-related data across the province and will facilitate geospatial business applications required by small communities and many large and small businesses.

Connected communities will have interactive Web sites which will allow the public to conduct many transactions, like obtaining licences and permits and paying taxes and bills on-line. Through GeoSmart, you'll be able to find local businesses, tourism sites and cultural attractions on a computerized map and obtain directions on how to get there. This new initiative will become a one-stop portal of information.

Through connections—

**The Speaker (Hon Gary Carr):** Order. I'm afraid the minister's time is over.

#### LOW LAKE LEVELS

**Mr Bruce Crozier (Essex):** My question is for the Minister of Natural Resources. As you are aware, abnormally low lake levels have affected rivers, streams and harbours in the Great Lakes area. Therefore, marinas and lake access in my riding of Essex, bounded by Lake St Clair, the Detroit River and Lake Erie, have been affected. Indeed, the problem exists on many parts of the Ontario shoreline. These low lake levels are having a devastating effect on small business employment and on tourism as a whole. In fact, I recently wrote you about the problem.

Minister, I'm asking that you give this emergency your personal attention. Will you consider giving special assistance to residents and marina owners in my riding of Essex by sharing the cost of necessary dredging?

**Hon John Snobelen (Minister of Natural Resources):** I want to thank the member for bringing up what is a very serious issue in Ontario, not just with the Great Lakes but with other bodies of water. I think there are people in communities right across this province who are concerned about low lake levels.

I can tell the member opposite that, in co-operation with the Ministry of the Environment, my ministry and other agencies of the government have taken on an initiative to make sure we fully understand what is happening in terms of low lake levels and can provide the proper

information to communities both in Essex and other parts of Ontario which need that information to do proper water planning, not just for this season but for the future.

**Mr Crozier:** Minister, I appreciate that, and that's speaking perhaps of groundwater. But this is a special circumstance that has been created and it is adversely affecting tourism in the province. Out-of-province boaters simply can't have access to marinas in the location of my riding. Property owners and marinas have lost almost total access to rivers and lakes.

In fact, I would hope that you look at this as a special circumstance, in addition to the groundwater problem, and at least come to the table with the marina operators in my area and provide some expertise from your ministry to help them solve that problem.

**Hon Mr Snobelen:** Again, I thank the honourable member for the question, for raising in the House a very serious issue. We in our ministry certainly are very interested in working with conservation authorities and municipalities in their concern about lake levels, about access. I'd be more than happy to provide the expertise that the ministry has to those agencies.

#### AIR TRANSPORTATION

**Mr Jerry J. Ouellette (Oshawa):** My question is for the Minister of Consumer and Commercial Relations. We in Ontario are fortunate to have access to many different airports—and believe me, if you've been to Fort Severn, you certainly know about airports—that take our travellers all around the globe. For the most part, these trips are successful and enjoyable. However, complaints about airline services are too frequent. Inability to find out information about delays, seating options and competitive fares are just some of the concerns that air passengers have raised, as we have seen through the reports in the media. Through claims of individuals such as Cliff Mackay's of the Air Transport Association of Canada about what the problem is, we certainly have questions about what the media are saying about air transportation.

Minister, could you explain to me what steps you have taken to improve the experiences of Ontario travellers?

**Hon Robert W. Runciman (Minister of Consumer and Commercial Relations):** The consumer ministry is responsible for the travel industry act, and as part of a consultation late last year I met with stakeholders in the travel industry in Ontario and listened to a range of concerns about airline passenger complaints with respect to operations out of Ontario and out of other provinces in this country. As a result of those discussions, we developed a discussion paper, Improving Quality Service Standards for Airline Passengers, and have passed this on to the federal Minister of Transport, Mr Collenette, with the sincere hope that he will follow the advice of Ontario consumers and Ontario travel agents operating very successfully in this province.

1510

**Mr Ouellette:** The service that Ontarians receive in the air should be, without question, of the highest quality.

I appreciate your taking on the task of informing the federal government what Ontario travellers are looking for.

Some people may be concerned that these recommendations may add additional red tape to an already highly regulated industry. Can you assure this House that your suggestions do not contain any unnecessary rules and regulations?

**Hon Mr Runciman:** There is nothing in this report that would suggest a return to the regulated environment that existed some years ago. These are purely voluntary recommendations, in the sense of providing advice to the federal government and to airline and charter operators across this country.

I have to say that I was concerned when I saw the response of the Canadian transportation association suggesting that there were no problems, no complaints of consumers in this country. Certainly my office has been inundated with concerns and complaints and, to be quite frank, horror stories. We're hoping that the federal government will respond. One of the reasons the Canadian transportation association is not hearing complaints is because consumers do not know who to complain to or how to complain. We have suggested the establishment of a registry at the federal level to receive consumer complaints and to deal with them and to inform the public in a timely way.

#### GOVERNMENT'S ENVIRONMENTAL RECORD

**Ms Marilyn Churley (Broadview-Greenwood):** I have a question for the new Minister of the Environment. The 1994 Canada-Ontario agreement committed Ontario and Ottawa to clean up 17 heavily polluted areas of concern on the Great Lakes, to reduce persistent toxic substances that pollute the lakes and harm our health, and to make serious financial commitments to support these efforts. Since the Harris government came to power you have systematically cut funding, and now you have let this important agreement expire. The Great Lakes are once again at the mercy of polluters, and you just let the feds walk away from this. Minister, this is a disgraceful start for you as the new minister. What are you going to do about it?

**Hon Dan Newman (Minister of the Environment):** This government is indeed committed to cleaning up, protecting and conserving our Great Lakes. In fact, the Great Lakes today are cleaner than they have been in decades, and Ontario recognizes that still more needs to be done. Yes, the Canada-Ontario agreement has expired. Officials have been speaking with our federal counterparts, and we've agreed to continue our co-operative efforts and to examine how we can best expand upon the momentum and progress we've made to date. Although the agreement has expired, I want to assure you that the commitments, programs and funding of the Canada-Ontario agreement remain in place.

**Ms Churley:** That is nonsense. You have already cut the funding. Go back and check that with your officials.

But I want to ask you another question. The National Post, the Globe and Mail and many others have recently said that you led the charge against concrete proposals to help Canada reduce greenhouse gas emissions. You should know, even if you are new to this, that Ontario's role is important for all of Canada to meet its Kyoto commitments. You went to the federal-provincial meeting as our new environment minister and you embarrassed us. You went to be there for the environment and you opposed every concrete proposal to reduce greenhouse gas. Minister, is there an explanation, or should we ask for your resignation today?

**Hon Mr Newman:** That's the best one I've heard since March 3. At the joint ministers' meeting, Minister Wilson and I played strong roles to get the federal government and the other provinces to go along with what Ontario is doing. In fact, to implement Kyoto without an assessment of the different options, including the costs, benefits and risks, would lead to ineffective, overly costly actions that will burden our industries and put Ontario's economy at a disadvantage with our trading partners around the world.

#### HIGHWAY MAINTENANCE

**Mr Michael Gravelle (Thunder Bay-Superior North):** My question is for the Minister of Transportation. Despite a moderate winter season, concerns about the maintenance of our provincial highway system have never been greater. As you change your standards by, among other things, lengthening road patrols, public confidence in the safety of our roads has plummeted. Now, as you move relentlessly towards full privatization of highway maintenance across the province, the facts indicate that not only are our roads less safe but that this privatization will actually cost taxpayers more money for diminished service levels.

In his report last November, the Provincial Auditor exposed the financial disaster that is likely awaiting us if you continue down this road, yet you continue to dismiss his report and our strong concerns as baseless.

Minister, will you stand in the Legislature today and guarantee that your privatization of road maintenance will achieve the 5% savings you are committed to, and if you are proven wrong, as we believe you will be, will you resign?

**Hon David Turnbull (Minister of Transportation):** Let me start by saying that road safety is our government's absolute top priority. Let me be very clear with you: There has been absolutely no reduction in winter maintenance standards. Do you understand? No reduction.

MTO has been outsourcing work since the early 1970s, and MTO staff monitor the work of the private contractors before, during and after winter storms. Contractors are contractually obliged to meet MTO standards. There is absolutely no room for cost cutting.



Clearly, we urge all motorists to adjust their driving—

**The Speaker (Hon Gary Carr):** I'm afraid the minister's time is up. Final supplementary.

**Mr Gravelle:** Minister, you began this privatization move back in 1996 with a three-year pilot project in the Chatham-Kent district, which we now sadly know as Carnage Alley. Years before the pilot was completed, and certainly before its effectiveness could be evaluated both from a fiscal and a public safety point of view, you pushed ahead with a plan to fully privatize this important public service across the province.

My question is very simple: How can you justify moving ahead before your own pilot project in Chatham-Kent was completed, without any evaluation of whether the privatization of highway maintenance was of benefit to taxpayers, let alone not affecting the public safety of drivers on this incredibly dangerous and frightening stretch of road? Minister, how can you justify that?

**Hon Mr Turnbull:** We are committed to finding efficiencies in government, unlike your party when they were the government. The auditor reviewed only 20% of the contracts. Subsequently more competition has been found and higher savings have been achieved. Regardless of the accounting method used, we are achieving or exceeding, in all cases, 5% savings. That's good news for taxpayers. We are investing the 5% in the roads, something you wouldn't relate to, because your party left the roads in a disastrous state when you were thrown out of office.

We are committed, on an ongoing basis, to finding efficiencies. But it will not be at the cost of safety, sir.

## PETITIONS

### WOMEN'S HEALTH SERVICES

**Mr Rick Bartolucci (Sudbury):** This is a petition to the Ontario Legislature.

"Whereas all women in Ontario should have access to the highest quality health care; and

"Whereas all women in Ontario should have access to drug therapies that will prevent diseases that most affect women after menopause, such as osteoporosis, heart disease and breast cancer;

"Therefore be it resolved that we, the undersigned, petition the Ontario Legislature to demand that the Mike Harris government provide immediate access, through the Ontario drug benefit plan, to scientifically proven drug therapies, such as Evista, where a physician believes it is appropriate" and in the best interests of the woman.

I affix my signature to this petition.

1520

### PROTECTION OF MINORS

**Mr John O'Toole (Durham):** I have a petition from the riding of Durham, of course. It's presented by Maria Speciale.

"To the Legislative Assembly of Ontario:

"Whereas children are exposed to sexually explicit material in variety stores and video rental outlets;

"Whereas bylaws vary from city to city and have failed to protect minors from unwanted exposure to sexually explicit material;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"To enact legislation which will:

"Create uniform standards in Ontario to prevent minors from being exposed to sexually explicit material in retail establishments; and

"Make it illegal to sell, rent, or loan sexually explicit materials to minors."

I present this on behalf of my petitioners and I'm pleased to support it.

## HEALTH CARE

**Mr Mario Sergio (York West):** I have a further petition which I have received in my office that states: "Say no to the privatization of health care."

"To the Legislative Assembly of Ontario:

"Whereas we are concerned about the quality of health care in Ontario;

"Whereas we do not believe that health care should be for sale;

"Whereas the Mike Harris government is taking steps to allow profit-driven companies to provide health care services in Ontario;

"Whereas we won't stand for profit over people;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"Do not privatize our health care system."

I concur with the content of the petition, and I will affix my signature to it.

## ABORTION

**Mr John O'Toole (Durham):** I'm pleased to present a petition from residents in the riding of Durham, constituents Pat Wilson, Monica Hoy and Paul Hoy, who, by the way, is a doctor, and Marie Gagnon. It reads as follows:

"To the Parliament of Ontario:

"Whereas we have recently learned that our tax money is being used to pay the rent on the Morgentaler abortuary; and

"Whereas by the end of his lease this amount will be \$5 million;

"Whereas we strongly object to this use of our tax dollars;

"We, the undersigned, petition the Parliament of Ontario to immediately cease these payments."

I'm pleased to support this petition.

## HIGHWAY SAFETY

**Mr Pat Hoy (Chatham-Kent Essex):** "To the Legislative Assembly of Ontario:

"Whereas 13 people died during the first seven months of 1999 on Highway 401 between London and Windsor; and

"Whereas traffic levels on all sections of Highway 401 continue to increase; and

"Whereas Canada's number one trade route and travel route was designed in the 1950s for fewer vehicles and lighter trucks; and

"Whereas road funding is almost completely paid through vehicle permit and driver licensing fees; and

"Whereas Ontario road users pay 28 cents per litre of tax on gasoline, adding up to over \$2.7 billion in provincial gas taxes, and over \$2.3 billion in federal gas taxes;

"We, the undersigned members of the Canadian Automobile Association and other residents of Ontario, respectfully request the Legislative Assembly of Ontario to immediately upgrade Highway 401 to at least a six-lane highway with fully paved shoulders and rumble strips; and

"We respectfully request that the Legislative Assembly of Ontario place firm pressure on the federal government to invest its gasoline tax revenue in road safety improvements in Ontario."

This petition is signed by a number of residents from Leamington and area and I sign my name to it.

## HEALTH CARE FUNDING

**Mr David Christopherson (Hamilton West):** I have a petition on behalf of many of the citizens in the Hamilton area.

"To the Legislative Assembly of Ontario:

"Whereas the Harris government has cut \$40 million from the budget of the Hamilton Health Sciences Corp, which has resulted in a health care crisis in Hamilton-Wentworth and left the Hamilton Health Sciences Corp with a \$40-million deficit; and

"Whereas the HHSC is now planning to downsize and cut back services at the Henderson hospital by converting the hospital to a day care with urgent care, rather than an emergency department; and

"Whereas this will have serious impact on emergency services for the 200,000 residents of Hamilton Mountain, upper Stoney Creek, Glanbrook, Ancaster and other communities above the escarpment; and

"Whereas the mountain population is a rapidly growing community and deserves and needs a full-service hospital; and

"Whereas an ambulatory care centre is not an acceptable replacement for a 24-hour emergency ward; and

"Whereas it does not make sense to spend \$100 million for a new cancer centre rather than half that amount to expand existing facilities at the Henderson General Hospital; and

"Whereas Mike Harris said in February the Henderson would remain open for acute and cancer care;

"Therefore, we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That the Legislative Assembly of Ontario direct the Harris government to restore the funding cuts to the Hamilton Health Sciences Corp and develop long-term solutions for the maintenance of appropriate acute care services at the Henderson hospital to serve the needs of the growing population of Hamilton-Wentworth and central south Ontario."

In support of these petitioners, I add my name.

## KARLA HOMOLKA

**Mr John O'Toole (Durham):** It's my pleasure, on this day when our Attorney General is standing up and speaking out for victims, to present a petition.

"To the Legislative Assembly of Ontario:

"Whereas Karla Homolka and Paul Bernardo were responsible for terrorizing entire communities in southern Ontario; and

"Whereas the Ontario government of the day made a deal with the devil with Karla Homolka resulting in a sentence that does not truly make her pay for her crimes; and

"Whereas our communities have not yet fully recovered from the trauma and sadness caused by Karla Homolka; and

"Whereas Karla Homolka believes that she should be entitled to pass to leave prison with an escort; and

"Whereas the people of Ontario believe that criminals should be forced to serve sentences that reflect the seriousness of their crimes;

"Therefore we, the undersigned, respectfully petition the Legislative Assembly of Ontario as follows:

"That the government of Ontario will:

"Do everything within its power to ensure that Karla Homolka serves her full sentence;

"Continue to reform parole and make it more difficult for serious offenders like Karla Homolka to return to our streets and our communities;

"Fight the federal government's plan to release up to 1,600 more convicted criminals on to Ontario streets; and

"Ensure that the Ontario government's sex offender registry is functioning as quickly as possible."

I'm pleased to support this and put my name to the petition.

## NORTHERN HEALTH TRAVEL GRANT

**Mr Michael Gravelle (Thunder Bay-Superior North):** The people of northern Ontario continue to be incensed about the inadequacy of the northern health travel grant. Petitions keep coming in. I have over 1,000 signatures here. It reads:

"To the Legislative Assembly of Ontario:

"Whereas the northern health travel grant was introduced in 1987 in recognition of the fact that northern



Ontario residents are often forced to receive treatment outside their own communities because of the lack of available services; and

"Whereas the Ontario government acknowledged that the costs associated with that travel should not be fully borne by those residents and therefore that financial support should be provided by the Ontario government through the travel grant program; and

"Whereas travel, accommodation and other costs have escalated sharply since the program was first put in place, particularly in the area of air travel; and

"Whereas the Ontario government has provided funds so that southern Ontario patients needing care at the Northwestern Ontario Cancer Centre have all their expenses paid while receiving treatment in the north which creates a double standard for health care delivery in the province; and

"Whereas northern Ontario residents should not receive a different level of health care nor be discriminated against because of their geographical locations;

"Therefore, we, the undersigned citizens of Ontario, petition the Ontario Legislature to acknowledge the unfairness and inadequacy of the northern health travel grant program and commit to a review of the program with a goal of providing 100% funding of the travel costs for residents needing care outside their communities until such time as that care is available in our communities."

I am very pleased to sign this. I have heard this from many people across northern Ontario.

#### OCCUPATIONAL HEALTH AND SAFETY

**Mr David Christopherson (Hamilton West):** I continue to receive petitions from auto workers. They are forwarded to me by Cathy Walker, the national health and safety director, and Buzz Hargrove, the national president of the Canadian Auto Workers.

"To the Legislative Assembly of Ontario:

"Whereas this year 130,000 Canadians will contract cancer and there are at minimum 17 funerals every day for Canadian workers who died from cancer caused by workplace exposure to cancer-causing substances (carcinogens);

"Whereas the World Health Organization estimates that 80% of all cancers have environmental causes and the International Labour Organization estimates that one million workers globally have cancer because of exposure at work to these carcinogens;

"Whereas most cancers can be beaten if government had the political will to make industry replace toxic substances with non-toxic substances in work;

"Whereas very few health organizations study the link between occupations and cancer, even though more study of this link is an important step to defeating this dreadful disease;

"Therefore we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That it become a legal requirement that occupational history be recorded on a standard form when a patient presents at a physician for diagnosis or treatment of

cancer, and that the diagnosis and occupational history be forwarded to a central cancer registry for analysis as to the link between cancer and occupation."

I add my name to theirs in support of this petition.

1530

#### ABORTION

**Mr David Tilson (Dufferin-Peel-Wellington-Grey):** I have a petition signed by a number of people from Mount Forest and Arthur. It's addressed to the Legislative Assembly of Ontario.

"Whereas the Ontario health system is overburdened and unnecessary spending must be cut; and

"Whereas pregnancy is not a disease, injury or illness and abortions are not therapeutic procedures; and

"Whereas the vast majority of abortions are done for reasons of convenience or finance; and

"Whereas the province has exclusive authority to determine what services will be insured; and

"Whereas the Canada Health Act does not require funding for elective procedures; and

"Whereas there is mounting evidence that abortion is in fact hazardous to women's health; and

"Whereas Ontario taxpayers funded over 46,000 abortions in 1995 at an estimated cost of \$25 million;

"Therefore we, the undersigned, petition the Legislative Assembly of Ontario to cease from providing any taxpayers' dollars for the performance of abortions."

#### CULTURAL ORGANIZATIONS

**Mr James J. Bradley (St Catharines):** I have one to the Legislative Assembly of Ontario.

"Whereas cultural organizations make an outstanding contribution to our province by sharing their customs, traditions, language and arts;

"Whereas our cultural organizations are generous in their benevolent contribution to the people of their communities;

"Whereas dramatic and unjustified increases in assessment for our cultural halls have created an extreme hardship for their membership;

"Be it resolved that the provincial government reinstate the previous assessment treatment for such facilities and abandon the assessment change that is so detrimental to our cultural organizations."

I affix my signature as I'm in agreement with it.

#### ABORTION

**Mr John O'Toole (Durham):** I continue to get a number of petitions, and although they are on the same topic, it's my duty to read them in the Legislature.

"To the Parliament of Ontario:

"Whereas we have recently learned that our tax money is being used to pay the rent on the Morgentaler abortuary; and

"Whereas by the end of his lease this amount will be \$5 million; and

"Whereas we strongly object to this use of our tax dollars;

"We, the undersigned, petition the Parliament of Ontario to immediately cease these payments."

I'm pleased to sign this petition.

#### NORTHERN HEALTH TRAVEL GRANT

**Mrs Lyn McLeod (Thunder Bay-Atikokan):** I have a petition to the Legislative Assembly of Ontario.

"Whereas the northern health travel grant was introduced in 1987 in recognition of the fact that northern Ontario residents are often forced to receive treatment outside their own communities because of the lack of available services; and

"Whereas the Ontario government acknowledged that the costs associated with that travel should not be fully borne by those residents and therefore that financial support should be provided by the Ontario government through the travel grant program; and

"Whereas travel accommodation and other costs have escalated sharply since the program was first put in place, particularly in the area of air travel; and

"Whereas the Ontario government has provided funds so that southern Ontario patients needing care at the Northwestern Ontario Cancer Centre have all their expenses paid while receiving treatment in the north, which creates a double standard for health care delivery in the province; and

"Whereas northern Ontario residents should not receive a different level of health care nor be discriminated against because of their geographical locations;

"Therefore we, the undersigned citizens of Ontario, petition the Ontario Legislature to acknowledge the unfairness and inadequacy of the northern health travel grant program and commit to a review of the program with a goal of providing 100% funding of the travel costs for residents needing care outside their communities until such time as that care is available in our communities."

It's signed by another 170 concerned constituents.

### ORDERS OF THE DAY

#### HEALTH CARE FUNDING

**Hon Michael D. Harris (Premier):** I move that the Legislative Assembly of the province of Ontario:

(a) Condemns the government of Canada for cutting, by \$4.2 billion annually, base payments under the federal program that supports health care, the CHST, while provincial governments have increased health spending;

(b) Urges the government of Canada to repudiate the statement attributed to a spokesperson for the federal finance minister, the Honourable Paul Martin, that in-

creasing health funding would be "just shovelling money into a hole that's going to open right back up again";

(c) Urges the government of Canada immediately to restore permanently the health funding that it has cut and to assume its fair share of increased ongoing funding to meet the health needs of our country's aging and growing population;

(d) Reminds the federal Minister of Health, the Honourable Allan Rock, that the sincerity of his commitment to medicare and the principles of the Canada Health Act would be best demonstrated not by idle rhetoric and vague words but by restoring the health funding he has cut.

I would like to split my time with the members from Kitchener-Waterloo, Waterloo-Wellington, Dufferin-Peel-Wellington-Grey and Willowdale.

This is the first motion we introduced for this session. I believe that we have provided some time to all opposition parties. Notice that (a) we said we would introduce the motion, and (b) we introduced it yesterday so we'd have some time for all members to consider it.

During the mid-90s, the federal Liberal government made a very historic decision. This was a decision that would have an enormous impact on the people of Canada, a decision that we are still struggling to deal with today. The Chrétien government began making the biggest cuts to health care funding in Canadian history. Whether they want to admit it or not, that decision hurt this country's health care system and it hurt this country's people.

Today, annual base funding for the CHST—this is the federal program that supports health care—is still \$4.2 billion lower than when the Liberals began cutting. Tax points, as phony an argument as that is, have not changed in the last 25 years. They were there 25 years ago, they were there 20 years ago, they were there 15 years ago, they were there when the Chrétien government was elected, and they are there today in exactly the same form as they were 25 years ago. What has changed is the actual federal dollar contribution to health care. That has been \$4.2 billion, real dollars, not indexed for inflation, not indexed for the cost increases in health care—4.2 billion real dollars less each and every year from the federal government.

As well, every third party, every independent, every government document from every ministry, including every budget document, indicates clearly that they have cut \$4.2 billion, regardless of whatever rhetoric they may have in paid advertising or in speeches. This has left every province in Canada struggling to make up the difference, to close the funding gap created by the federal government's cuts. It has left every province struggling to increase funding even further to provide more and new services to patients. But, although the federal government's health care funding has decreased, our people's need for health care has not decreased. Ontario has maintained a quality system. I want to repeat that: We've maintained a quality system despite the federal cuts. Not only have we made up for the federal cuts costing



Ontario \$1.7 billion; we've increased annual funding by \$3 billion more, on top of that, since we took office. Even though we've called on the federal government time and again, the recent federal budget provided no permanent health funding.

Our government has launched an advertising campaign to convince the federal government to give back over \$4 billion that Ottawa cut from health care across the country. This \$3-million advertising investment is to get \$4.2 billion back into the hands of our provincial health ministers, where those dollars belong.

You know, as the Minister of Health has said, "We have no choice but to increase pressure on the federal government, since its cuts continue to put serious pressure on all the provinces."

1540

The calls to restore funding aren't just coming from the government of Ontario; they're coming from health providers, they're coming from all other Premiers and territorial leaders, they're coming from all other health ministers, they're coming from doctors, from nurses, from professionals all across the country.

Newfoundland Premier Brian Tobin was interviewed during the recent federal Liberal convention, a pretty well identified federal and provincial Liberal. Here's what he said: "We"—meaning the federal Liberal Party whose convention he was attending—"need to put our money where our mouth is."

Ontario's doctors, nurses and hospitals have published an open letter to the Prime Minister. They say: "Now, in an era of large budgetary surpluses and strong economic growth, it is time for the federal government to reinvest in our health care system and fully restore transfer payments to the provinces. Mr Prime Minister, we look to your government to reinvest in our cherished health care system. We ask that you work with the provinces to ensure health care services are maintained at the level Canadians expect and need."

When we launched our advertisements, the Ontario long-term care association issued a statement. They said, "The association and its members are supportive of the message contained in the public awareness campaign launched today by the provincial government to address the issue"—to address the issue of the underfunding, to put pressure to restore the \$4.2 billion and to educate Ontarians and indeed Canadians as to what has happened to federal health care funding since the Chrétien government was elected.

We must, as a government, and I believe as individual members of the Ontario Legislature, condemn the federal government for failing to restore permanent health care funding, particularly now, at a time with such significant surpluses.

We must condemn the recent statement by a spokesperson for the federal finance minister, who implied that increasing health funding was a waste of money.

Despite earnest-sounding commitments to medicare and the principles of the Canada Health Act, Allan Rock will actually commit to one thing, and one thing only:

talk, time frames for more meetings—not money, not real reform; time frames for more meetings.

I explained yesterday that while Allan Rock likes to talk about reforming the health care system, last week he wasn't ready to engage in meaningful dialogue about reform. I think he clearly lacked a mandate from his government, his party, his Prime Minister and his Minister of Finance to do so. The meeting's failure was directly attributable to the federal government's failure to do its homework, failure to come prepared to talk about reforms that the federal government had claimed to want to discuss.

Our Minister of Health went to those meetings prepared. She brought to Markham information and figures about Ontario's reform agenda, our health action plan. She was happy to explain to Allan Rock the reforms we are in the process right now of implementing, what they cost, what it would take and the cost to extend Ontario's reforms nationwide, home care, community care, pharmacare, expanded long-term care, primary care reform, hospital restructuring, and investments in new technology.

Allan Rock didn't come to the meeting with a commitment to provide stable long-term funding, and while that was a disappointment, it was not entirely a surprise. What was surprising is that he did not even have anything to say about our health reform agenda. Does the federal government support these reforms? Does it oppose them? Does the federal government think Ontario should be moving faster? Does it think we should be moving slower? Should we be doing things differently? Does the federal government take any position on the reforms now being implemented in each province all across this country? What new ideas does the federal government have? What new ideas does the federal health minister have? We don't know, because the federal minister won't, or he didn't, say.

Instead, Allan Rock talked about process. His call for more meetings was simply more foot-dragging from the federal government. They implied—they have done this through the media, the Prime Minister, the Minister of Health, the Minister of Finance. They've left the impression that there's more money for the system if the system is reformed. Well, Allan Rock may not have noticed, but we've already moved from plans and process to action. Reform is underway. The reform train has left the station and they are not on it. They are not trying to get on it. They don't seem to want to be on it.

We are already improving our health care system in Ontario, and the other provinces are too. Consider some of the so-called new ideas that Allan Rock has mentioned, ideas that for some reason he was unable to discuss in a meaningful way last week.

First, expanded access to family doctors on a seven-day/24-hour basis. Health experts call this primary care reform. We announced primary care reform in July 1996. We have pilot projects running now in seven communities. We're working with the Ontario Medical Association to expand public access to family physicians.

Since we're already at work, we don't need rhetoric from Ottawa; what we need is federal funding. Ontario already spends \$4.2 billion annually on physician services. So today I ask Allan Rock, aside from the federal contribution to start-up costs, what portion of physicians' compensation will the federal government cover?

Second, Allan Rock has talked about home care and community care. These services take pressure off the hospital system by allowing patients to be treated at home or close to home—a good idea, but not exactly new. Ontario's home care program is already the most generous in the country. As we continue to expand community- and home-based care, we don't need more talk from Ottawa, but federal funding would certainly help. Ontario spends nearly \$1.5 billion annually on home care and community care. So today I ask Allan Rock, what portion of that will the federal government cover?

Third, pharmacare. Allan Rock has talked about helping patients pay for drugs. Well, guess what? Ontario already offers the most generous public drug plan in the country. Except for modest deductibles and fees, the provincial government pays the cost of prescription drugs for seniors, social assistance recipients and families burdened by catastrophic illness. We continue to increase our support for drug care. We don't need words from Ottawa, but federal financial support would be welcome. Ontario already spends \$1.6 billion annually for drug care. So today I ask Allan Rock, what portion of that will the federal government cover? I ask Allan Rock, what kind of national pharmacare project do you support?

As I said yesterday, if there are to be future meetings, Allan Rock needs to do his homework and he needs to come prepared with ideas. He should tell us what new national reform programs he is prepared to support. He should come prepared to tell us which provincial reforms he doesn't support. He should tell us what else he thinks we should be doing. And when he comes, he must know how many long-term, stable, inflation-adjusted dollars will be available to the provinces to embark on these reforms.

Provinces are leery of new national programs without guaranteed funding. We're happy to talk about upping the standards to Ontario's level of pharmacare, long-term care and home care. We're happy to discuss how we can have a national program so Canadians from coast to coast in some of the have-not provinces can have these very real, cherished and tangible benefits that we have in Ontario.

But why are we leery of a new national program without guaranteed funding? Think of medicare: 50-50 to start, 50% federal and 50% provincial. The New Democratic Party plans to introduce a motion, I believe, called the Tommy Douglas bill: 50-50, Tommy Douglas said, 50% federal and 50% provincial. Today in Ontario it is 89% Ontario taxpayers, 11% federal taxpayers. That sums up the federal government's health care record: less funding. More talk, lots more talk, but no ideas and no financial support for reform.

1550

Allan Rock talks about innovation, but either he does not have any new ideas or he is not prepared to talk about them. Why? We're not sure. We don't know if he's waiting for this fall or next spring. We don't know if he wants to wait until after an election before he talks about them. But I'll tell you, that's the impression he leaves with Canadians when he says he has ideas. He says, "I've got money if we'll just have reforms," but he won't tell us what reforms and he doesn't acknowledge the reforms taking place all across Canada. He does not acknowledge the changes that are taking place. He does not acknowledge the contributions that provincial governments across this country have made to reform at the same time as we've had to do it with two hands tied behind our back because the federal government slashed funding.

Provincial governments have been innovating for years, despite the federal cuts to health care. Provincial governments are reforming to meet the needs of our growing and our aging population, despite these cuts. My colleague Premier Gary Doer of Manitoba recently summed up the situation quite nicely. Upon hearing that Allan Rock wants to talk about getting home care implemented before he offers more federal funding, Premier Doer pointed out Manitoba has offered home care for 25 years. He wondered why Allan Rock has been so slow to catch on. Premier Doer said, "The next thing you know, he'll be showing up in bell-bottom pants."

By the time he comes with money, maybe they'll be in fashion; I don't know. But here's a new idea, something we haven't heard of in quite some time, something Allan Rock hasn't considered yet: restored base federal health care funding, full restoration of the CHST, the federal program that supports health care.

I ask members for their full support for our resolution on federal health care funding. It contains four main points: First, it condemns the federal government for cutting \$4.2 billion in base funding annually from the program that supports health care while the provinces, each and every one of them, have increased their health funding; second, it denounces the recent statement that compares health funding to "shovelling money into a hole that's going to open right back up again"; third, it urges the government of Canada to restore permanent health funding immediately and assume its share of rising costs; fourth, it reminds the federal Minister of Health that talking about preserving medicare and the five principles of the Canada Health Act is not enough.

As we said in our Blueprint, "Our government is fully committed to the principles of the Canada Health Act, including universal access to a publicly funded health care system." But the system needs more than words. It needs more than a phony promise that federal money will come once we agree on reforms, especially when the provinces and health professionals are already working hard at those very same reforms and improvements. It needs money.

This is a resolution that is in the best interests of the people of Ontario. It is a resolution whose time has come,



and it is a resolution that I believe every member of this Legislature can and should support.

Today I know there will be other points of view in the debate. I know there'll be some criticisms of our government, perhaps other provincial governments. But I believe at the end of the day, when it comes time to vote, there can be unanimity to send a clear message from this House straight to Ottawa. That unanimity should send that message, that talk is cheap but reforms cost money. If you believe in reforms, if you support the reforms now underway, commit to the stable, long-term funding needed to support those reforms that will meet the needs of our aging and our growing population.

**The Acting Speaker (Mr Tony Martin):** Further debate?

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** I rise in the House today to support the resolution put forward by my Premier, which calls on the government of Canada to immediately and permanently restore the health funding of \$4.2 billion that it has cut since 1994-95.

Further to that, I echo the words of the Premier when he calls not only for restored funding but ongoing funding to meet the health needs of our country's aging and growing population, the cost of new technology, innovation, drugs and innovative medical treatments. As the Premier stated in his resolution, I too reminded federal Minister Rock that as the federal government has cut \$4.2 billion annually in base payments under the federal program that supports health care, the CHST, all provincial governments have not only made up that \$4.2-billion shortfall, but they have all increased their health spending.

Furthermore, it is important to remember that this was the most massive cut to health funding in Canadian history, this \$4.2 billion.

Last week, when I met with my colleagues, provincial and territorial ministers in Markham, with Mr Rock, we reminded him of these funding cuts and the impact it was having on the respective constituencies we represented. We also took the time to share with him the innovation and reforms that we had initiated in our respective jurisdictions and that we had done so with the support of our stakeholders: our doctors, our nurses, our long-term-care stakeholders and our hospitals.

We have all moved forward in order that we can meet the health needs of Canadians not only today but into the future. That is why sustainable, long-term funding is absolutely necessary in order that we can continue to meet those future needs of all Canadians. Every one of us informed Mr Rock that it was the provincial and territorial governments who had taken the lead on reform and who had taken very decisive action—all of this at a time when we have seen absolutely no action from the federal government. We have seen no new ideas; we have seen only talk.

Last month, leading up to last week's meeting in Markham, we had observed a federal government that was trying to run to the start of a parade on health reform

that had already begun a long time ago without them present. I reminded Mr Rock last year about the fact that the Ontario government has been working very hard with its stakeholders for the past five years on reforms and innovation to the health system as we implement our vision for health care.

Our vision is that we are committed to a health system that promotes wellness and improves health outcomes for Ontarians through accessible, integrated and quality services at every stage of life and as close to home as possible. Ontario reforms include investing in new technology, expanding home and community care, reducing waiting lists, hiring 12,000 more nurses, focusing on illness and injury prevention and health promotion and opening 20,000 new long-term-care beds.

I told Mr Rock that we've shown our commitment to health care by increasing annual health spending by \$3 billion since 1995, from \$17.6 billion to \$20.6 billion, despite the federal funding cash cut of \$1.7 billion since 1994-95. I am proud to say that our government, under the leadership of Premier Harris, has recognized the need for additional health funding. We will be increasing health funding by another 20%, to \$22.7 billion over the next four years, to make sure that our health system continues to meet the needs of our growing and our aging population.

1600

I shared with Mr Rock one of the most telling statistics I have heard recently as to why we need more funding. In this province today, and I know that they have a similar situation in other provinces, 50% of our health care costs—in other words, 50% of our \$20.6 billion—is going to support 12.6% of our population, those over the age of 65, and in the next 10 to 20 years that group will bulge as the baby boomers reach that age. And so it is absolutely imperative that we plan now to meet that increased need for services that we're going to be seeing in long-term care, home care and drug benefits.

As well as responding to the needs of a growing and aging population, we are also facing the challenge of increased public expectation. Today, people are better informed. They read and they learn about new technology, treatment and drugs through the Internet and the media, and they are demanding that those services be provided not only in Ontario but throughout Canada.

In response to the challenges that we face, we shared with Mr Rock about our restructuring, our strengthening and our modernization of our hospitals, with an eye to ensuring that services are available closer to home. In our own province we are expanding cancer services and we are constructing five new facilities in St Catharines, Sault Ste Marie, Kitchener-Waterloo, Mississauga and in Durham.

We're also expanding cardiac services to bring services closer to home, and again, we have new services in York county, in Mississauga and in Kitchener-Waterloo.

In the area of dialysis, where we're seeing an increased need for services as our population ages, we have approximately 25 additional dialysis services closer

to home. One of the most recent services was introduced in Penetanguishene in order that people don't need to drive the long distances every day. Our government will continue to ensure that those vital patient services are made available closer to home.

We're expanding MRIs to 36 and we have plans for more.

We all indicated to Mr Rock that not one of the provincial or territorial governments had waited, nor could we afford to wait, for the federal government to take leadership in the area of reform.

Let me talk about the home care program where we in this province recognized early in our mandate the need to expand home care services, not only as an alternative to hospital care but in providing a continuum of care that includes prevention, primary care, hospitals, home care and long-term-care services.

We have established one-stop community care access centres, 43 to be exact, to offer health care and support services to Ontario residents in their homes. In 1999 alone, the CCACs helped more than 420,000 Ontario residents receive services such as nursing, homemaking and therapy. In addition, in this province we have committed \$1.2 billion to create 20,000 new long-term-care beds to meet the needs of our aging population as well as reconstructing 13,200 beds again so that they will meet the new design standards in order that we can enhance the quality of life for our older citizens.

In one of the most generous programs in this country, Ontario today spends about \$1.5 billion each year on home and community care. That is a 49% increase in funding for home care since 1995.

As I talked about home care, I had hoped that Mr Rock would recognize the initiatives that we had undertaken, the increase in services and funding, and that there would be some offer to share, and also an offer to work with us in further addressing these issues. But he did not.

I shared our plans and our implementation of primary care reform. In order to improve access to doctors, nurses and nurse practitioners, our government has established a 1-800 Telehealth service to residents in northern Ontario which provides after-hours health advice as well as enhancing health educational services. We will be expanding Telehealth to other parts of the province in order that we can provide 24-hour-a-day, seven-days-a-week access to health professionals.

In partnership with Minister Hudak and the Ministry of Northern Development and Mines, we are working to expand telemedicine services to the remote areas of this province in order that those people can have equal access to health care services.

In addition to improving access to primary care, our government has already established innovative programs to recruit and retain primary care physicians to small communities in rural and northern Ontario. We have provided \$90 million in alternative payment plans for 85 small and rural hospitals to improve access to physicians and hospital emergency rooms.

We have also expanded the number of community health centres in Ontario, adding three last year, in order that we can bring services closer to home for more Ontario citizens.

I also told Mr Rock about the pilot program that we had undertaken in this province in the area of primary care reform. We have demonstrated that this is a priority. We have worked in partnership with the Ontario Medical Association since 1995, and I'm pleased to say that we presently have seven pilot projects underway. These innovative pilots will expand access to family doctors, nurses, nurse practitioners and other health professionals on a seven-day-a-week, 24-hour basis. Indeed, I am pleased to say that we have been encouraged with the acceptance of the primary care pilot project by the physicians and the patients who are participating.

We do certainly continue to recommend that there be choice for physicians, choice for patients, and that we not make this mandatory for physicians or we not eliminate choice of physicians for the patients. We believe that we need to encourage physicians, we need to encourage patients, and we need to ensure that it moves forward in a co-operative manner. We also need to ensure that we can properly evaluate the new system to ensure that it is providing quality health care.

I was hoping that Mr Rock would jump in and tell us about any other ideas that he might have for improving access to primary care. I was hoping that he would let us know how we could continue to move co-operatively forward to improve the primary care reforms that have been undertaken not only in Ontario but elsewhere.

I also, in the days of last week, shared with Mr Rock our plan in the area of pharmacare, as did my colleagues. I realize that we have one of the most generous provincial drug plans in all of Canada. We have taken a leadership role, despite the \$1.7 billion in federal cuts in Ontario. Our drug plan today pays 44 million prescriptions every year for more than two million seniors and social assistance recipients.

We have another program called the Trillium drug program, which assists another 100,000 Ontarians who need expensive drugs to treat serious illnesses such as cancer, HIV, schizophrenia and cystic fibrosis. In fact, our government continues to make new drugs available on the formulary and we have added more than 1,000 new drugs since 1995. Today we are spending \$1.6 billion annually on drug programs, an increase of \$500 million since 1995.

Again, all of the provinces were waiting for ideas from Mr Rock as to how we could continue to move forward collaboratively on ensuring that our citizens had access to the new drugs that were coming on the market. But, again, there was no indication of any financial support or of any plan for pharmacare.

**1610**

I just want to indicate at this point in time that this is one of the fastest-growing areas of health care costs in this province and all across Canada. We are increasing spending from about 10% per year to about 15%, and in



some of the other provinces the increase is even greater. So there is an absolute need for the federal government to get back into the health care game and support the provinces in providing for new drugs to treat illnesses in this province and across Canada.

I also mentioned to Mr Rock the initiatives we had taken to complement primary health care delivery in this province. It was our government that in 1998 proclaimed legislation to recognize the role of nurse practitioners. These nurse practitioners can write prescriptions and provide certain health services that used to be performed only by doctors. To date, I am proud to say we have provided \$15 million in funding to support 226 nurse practitioner positions. These nurse practitioners are now working with doctors and other health professionals in communities across Ontario to ensure that Ontario's citizens have improved access to primary health services and services in the long-term-care centres. Again, there was no response by Mr Rock to increase the funding to support these nurse practitioners or any new ideas.

All of us, the provincial and territorial health ministers, spent most of our first day of the meeting educating Mr Rock on how we were assuming our health care responsibilities and being accountable to our constituents in the delivery of health care services in order that we could respond to their emerging needs. Each of us learned that we were not alone in the challenges we face on a daily basis. That the financial crunch is felt as strongly, if not more strongly, in other parts of the country came through loud and clear.

One of the ministers reminded Mr Rock that it is us, those of us on the front lines, who are the legitimate representatives in the area of health. That minister reminded the federal health minister that temporary transfers, as we received this year, are unacceptable because health care needs are not temporary. We need permanent, sustainable funding.

Another minister pointed out to Mr Rock that his province spent eight times more, proportionately, on health than does the federal government. In Ontario we've been spending nine times more to date. In fact, today the federal government provides a mere 11 cents of every health care dollar spent in Ontario while Ontario citizens provide 89 cents.

Another minister told Mr Rock that he was tired of hearing the tax point argument. He said: "Tax points are not cash. They should not be in the equation." He reminded the minister that a long time ago the provinces gave the federal government tax points, but he said, "No longer can you mask the truth of the fact that you've cut health care funding."

Indeed, if we take a look at the federal government's own campaign platform, they acknowledged and said, "It is a fact that during our first mandate this government reduced transfer payments to the provinces." Health Minister Rock confirmed the same point to the Canadian Medical Association in 1997 when he said: "I will not stand here and tell you that the cuts in transfer payments we made were insignificant. They were not. And I won't

tell you that they have not had an impact. They have." So today, let's not try to mask the fact of the federal health cuts with the tax point argument, because even Mr Rock, and the federal red book in previous years, acknowledged the fact that cuts have been made in transfer payments and that they have had a detrimental impact on what we're able to do in health in our respective provinces and territories.

We collectively told Mr Rock that we needed long-term, sustainable funding in order to do long-term planning, but we heard no response on either funding or a plan for action. When Mr Rock spoke to the media at the end of the first day, he said he found the session very informative. A reporter asked him, "Didn't you already know those things?" and he responded that he guessed he did. I'm not so sure he did know the extent of the reforms we had undertaken in Canada and in Ontario. Based on the cuts to funding that the federal government has been making, one cannot be at all sure that it has a strong sense of what the provinces and territories are doing on the front lines to provide high-quality, accessible health care services to our citizens.

I also want to let you know that in some provinces health costs today are consuming 40% of the total provincial government budget, and they are rising. One of my colleagues, in response, said that they are going to be forced to reduce some of their children's services. Another one said that they're going to have to increase the contribution to drug costs to maybe somewhere in the neighbourhood of a \$1,700 deductible. That's a long way from our \$100. In fact, in the province of Saskatchewan they discussed the fact that perhaps there was some threat to medicare. Well, when we talk about medicare and we talk about the idea of 50-50 funding for health care services, I think you can see that we've moved a long way from the sharing of 50-50. In this province we're getting only 11 cents, and we are now supporting the health system with 89 cents and will continue to do so.

Coming out of the meeting last week, what is the next step? I believe it is important to try to get the federal government to move forward, to not abandon our health care system, that today is an example to the rest of the world. The federal government must again assume the responsibility for cost-sharing health care that they have abdicated since 1994 and 1995, and that they have acknowledged has had a significant impact. They must get back into health care; they must make a commitment to the people in Canada. We are prepared to work collectively with them as we move forward in order to ensure that happens.

At the conclusion of last week's meeting on Friday, my colleagues and I unanimously agreed that the federal government must do the following:

(1) As a minimum, immediately restore the Canadian health and social transfer to 1994-95 levels, with an annual escalator to ensure that funding for health through CHST keeps pace with the economic and social factors that impact on the sustainability of the system.

(2) We also question their commitment to the Canada Health Act, so we have asked them to reaffirm their fiscal support for the Canada Health Act.

(3) We also recognize and want them to know that the provinces and the territories are, and always have been, willing to consider any proposal at any time to ensure sustainability of the publicly funded Canadian health care system.

It is remarkable that governments of all political stripes—whether the NDP governments in Manitoba, Saskatchewan and BC, whether PC governments, whether the Liberal government of Newfoundland or the government of Mr Bouchard in Quebec—all unanimously agreed that there must be immediate restoration of the health cuts, that there must be a reaffirmation of the federal government's commitment to the Canada Health Act, and also a willingness on our part to continue to meet to address the health care needs of all Canadians.

Today I conclude my remarks by urging this House to unanimously support the resolution introduced by our Premier. It is only by uniting our voices that we can convince the federal government and the Prime Minister to reinvest in the publicly funded, universally accessible Canadian health care system, and it is only by uniting our voices that we will be able to encourage them to support the provinces in their reform and to work with us to ensure that accessible, quality health services continue to be provided to all Canadians not only today but also in the future.

1620

**Mr David Tilson (Dufferin-Peel-Wellington-Grey):**

I too would like to participate in this debate of the resolution put forward by the Premier. I will say that this debate about the funding of health care has come upon us really as a part of the frustration as to what the federal government is doing. Originally the Canada Health Act was a 50-50 cost-sharing measure. It was changed, I believe, by Mr Trudeau in 1977, who turned it into a block funding type of arrangement. Gradually, from that point to the present, we are now seeing the federal government contribute 11 cents on the dollar as opposed to 50 cents on the dollar.

Of course, Mr Chrétien has put forward ads saying that's not true. You know, it is true. Stats have come forward to us from all sources indicating that that information simply is not correct.

I have a couple of quotes—

**Mr Bart Maves (Niagara Falls):** I'd love to hear them.

**Mr Tilson:** I'd like to give them to you.

This philosophy of the federal government making cutbacks with respect to health care isn't a new issue. The famous 1997 red book said, at page 71, "It is a fact that during our first mandate, this government reduced transfer payments to the provinces." So they are acknowledging it. This is the federal Liberal red book. They're acknowledging that transfer payments were reduced.

In the Toronto Star on October 27, 1996, Mr Chrétien said, and this is a remarkable statement, "We need to squeeze medicare in order to save it." I don't understand that. I'm not going to go into the information that was given by the Premier and the Minister of Health with respect to why the cost of health care is increasing, whether it be the increasing cost of drugs or the increased aging of our population. We're in deep trouble in this country, not just in Ontario but across the country.

As the previous speaker said, this isn't just Ontario; the provinces are united on this subject. The federal government keeps saying, "We have to restructure." Mr Rock and Mr Chrétien say, "We must restructure our health care before we give you any more money."

**Interjection:** That's what we've been doing.

**Mr Tilson:** That's correct. What have we been doing since we came to office? Members of the opposition have been quite critical of the government and the restructuring that has been going on in this province. On the other hand, Mr Rock says, "We're not going to give you any more money until you are restructured." Then, in a speech to the 130th annual meeting of the Canadian Medical Association in Victoria on August 20, 1997, three years ago, Mr Rock said: "I am part of the problem, not the solution. It was my government that diminished the size of transfer payments." He acknowledged that the federal Liberal government cut back transfer payments. He acknowledged that the country needs more funding.

The final quote I would like to give you was also by the federal Minister of Health on August 20, 1997. Allan Rock said: "I will not stand here and tell you that the cuts in transfer payments we made were insignificant. They were not. And I won't tell you that they have not had an impact. They have." Well, duh, of course. That is why we're in the mess we're in.

This resolution that has come forward to this House is made hopefully to urge the opposition parties to participate with the government members, as is going on in every Legislature across this great country, to urge the federal government to come to their senses.

The Ontario government has an action plan for health care reform. The Ontario government, since coming to power in 1995, has moved aggressively to reform all areas of the health care system, to eliminate inefficiencies and to bring services closer to home for Ontario citizens. We've been working with doctors, hospitals, nurses and many other health care professionals to find innovative ways to reform our health care system so that we'll meet the needs of Ontario residents in the new millennium.

The minister heard from her provincial and territorial colleagues that they too have been reforming their health care systems for a number of years. It seems the only person who is not aware that health care reform is already underway is the federal government. So, federal government, as one recent supporting actor said in the Oscars at a recent movie, "Show us the money." That's what we need.

**Mr Ted Arnott (Waterloo-Wellington):** I'm very pleased to have the opportunity to join my colleagues this



afternoon in speaking in support of this resolution on behalf of my constituents in Waterloo-Wellington.

The resolution reads as follows: Be it resolved "That the Legislative Assembly of the province of Ontario,

"(a) Condemns the government of Canada for cutting, by \$4.2 billion annually, base payments under the federal program that supports health care, the CHST, while provincial governments have increased health spending;

"(b) Urges the government of Canada to repudiate the statement attributed to a spokesperson for the federal finance minister, the Honourable Paul Martin, that increasing health funding would be 'just shovelling money into a hole that's going to open right back up again';

"(c) Urges the government of Canada immediately to restore permanently the health funding that it has cut and to assume its fair share of increased ongoing funding to meet the health needs of our country's aging and growing population; and

"(d) Reminds the federal Minister of Health, the Honourable Allan Rock, that the sincerity of his commitment to medicare and the principles of the Canada Health Act would be best demonstrated not by idle rhetoric and vague words, but by restoring the health funding he has cut."

I see this as an opportunity for all members of this Legislature to send a strong signal to the federal government. I stress the need for all-party support, because the government of Canada and the people of Ontario must know that, firstly, the paltry 11 cents on the dollar the federal government contributes to Ontario's health care system is completely unacceptable, especially in the context of a projected \$100-billion federal surplus over the next five years, and it's a far cry from the 50-50 proposition for medicare that started over 30 years ago; and secondly, that rising cost pressures, driven by factors including changing demographics, our aging population, new technologies and a growing population, combine to demand from the federal government an urgent, real and understanding commitment to the future of health care in the province of Ontario.

Colleagues in this Legislature who know me and have worked with me over the years should know that I believe that with the right approach you can actually bridge the differences which divide the political parties in this place and work together for the public good. We've done it in the past. When I first discussed federal funding for health care in the fall session and tabled my own private member's resolution last December on this issue, I did so because I felt that health care was one of those issues for which we should bridge that divide.

I'm delighted that this initiative has been recognized by the Premier and largely incorporated by the government resolution that's up for debate today. I would take this opportunity to thank my honourable friend the Minister of Health, who for some time has challenged the federal government to restore its commitment to health funding. As she said, "It's time for them to get back into the health care game." She has been steadfast in this endeavour and has, in recent months, emerged as the

most significant health minister in Canada, providing leadership in the void which I call Allan Rock.

Turning now to our friends across the aisle, I want to thank the Leader of the Opposition for recently taking a stand relative to the federal government's shortcomings in the area of health funding. His resolution, which he tabled yesterday, quite rightly points out that the funding from the federal government is insufficient to modernize Ontario's health services so that we can provide the quality care that Ontarians need and deserve. He had an opportunity to put forward this position earlier, and, as he should know, I sent a letter to his health critic right after the Christmas break, asking for her support for my resolution. I mailed the letter and faxed it to her constituency and legislative offices on, I believe, January 5. I would have appreciated a response to this letter from the member for Thunder Bay-Atikokan, but I've heard nothing in response. I guess at that time, when I sent the letter, the Liberal position was uncertain. Perhaps the Leader of the Opposition did finally have his own meeting with the Prime Minister, as he said he would, and talk to the Prime Minister, as he said he would. And perhaps he was as unimpressed as our Minister of Health was in Markham last week when it appeared, after more than five years of cutting health care, that the government of Canada has no new ideas of its own for health care. That is part of the reason why I come back to this non-partisan effort that we should put forward today. If this resolution today receives unanimous support, then we in the Legislature will speak with one voice which the federal government must acknowledge and heed.

1630

The Leader of the Opposition supports our position, but he has tabled a resolution of his own, which is fine. He says he's doing this because he doesn't like advertising. Well, the more people who know the truth about the paltry 11 cents on the dollar that the federal government contributes in cash transfers, the better chance we have of achieving a stronger commitment from them. The stronger the federal commitment, the better off Ontarians will be. Health care is too urgent to wait until a federal election this fall.

The Leader of the Opposition also questions sincerity on the basis of the timing of these advertisements. Again, where was his support when I tabled this resolution in the fall session? Where was his party when I wrote the subsequent letter to the health critic asking for support in advance of the tabling of the federal budget, when Paul Martin was still consulting before the final decisions had been made on the federal budget? The Leader of the Opposition's challenge to sincerity is difficult to reconcile with his own actions. Not a year ago, his election platform, which he called 20/20, made absolutely no firm commitment for health care spending. When questioned later, before and during the election campaign, he promised to spend as much as we're spending, or even less, depending on which paper you look back on.

Our party, on the other hand, clearly spelled out a 20% health care increase over a five-year period. We always

said that a stronger economy, supported by tax cuts, a balanced budget and a debt reduction strategy, means stronger health care for all of us for the long term.

We know where the federal government stands, or at least where they stood. Let's see.

First, immediately after their budget in February, hearing the outcry from all the provinces, they accused the provinces of letting money sit in the bank. Then they were reminded that they had imposed the conditions that required the money to remain in the bank over a three-year period, so they stopped talking about that excuse.

Second, they tried to muddy the waters with talk about tax points, going back to 1977. To this, I quote Prime Minister Lester Pearson's top adviser, Tom Kent, who said that the tax point argument is "misrepresentation." Mr Kent is also referred to as the father of medicare, and he went on to point out that a cash transfer, on the other hand, is money that the federal government provides to the provinces out of its taxes, not theirs. Clearly, tax points and cash transfers are two totally different things.

Now they're trying to dispute the numbers. Last week they said they paid 34% of the total health care bill; in today's paper they're now saying they pay 55%. I say that's hogwash. We know their problem: They want to assume control but evade responsibility for the issue.

Based on what I heard yesterday, the Leader of the Opposition says he wants to fight for something, not against someone, and he deserves credit for that stance. Then I would say to the opposition members opposite that they had better ask themselves, who understands Ontarians' health care needs and concerns best? Do the citizens of Ontario want to hear about phony tax points from 1977? I don't think so, and I'd suggest that we start listening to what Ontarians have been telling us. They are telling us that health care is their number one priority, now and in the future. They are telling us that we must take whatever measures are necessary to preserve and enhance health care. They supported a major restructuring of health care to improve access to services wherever and whenever health care is needed, something that was ignored by previous governments. And they expect their elected representatives of all political stripes to pull together when needed, to strengthen the integrity of fiscal federalism and demand in unison that the government of Canada take responsibility and provide the funding to meet health care demands in the future for all residents of Ontario.

I urge all members of this House to support this resolution this afternoon.

**Mr David Young (Willowdale):** I appreciate having this brief time, and I do emphasize that it will be brief. I think it's important, before we move on to the members opposite in this debate, to understand just what we are talking about when we talk about the amount of money that is being spent on advertising. First of all, the number at issue that the federal government has clawed back is \$1.7 billion; that's the outstanding shortfall. The amount per Ontarian, the amount per person in this province that we are spending on advertising—an investment to try to

get back that \$1.7 billion—is 50 cents a person, for a family of four \$2, about the price of a token to get on the subway in Toronto.

If we are successful—and by all indications we are achieving some degree of success to date. If we are successful, the amount we will get back for each family is—

**The Acting Speaker (Mr Michael A. Brown):** Thank you. Further debate?

**Mrs Lyn McLeod (Thunder Bay-Atikokan):** Mr Speaker, I will be sharing my time today with my colleagues from Windsor-Sandwich, Hamilton East and Windsor-St Clair.

I'd like to begin my participation in this debate by just taking a step back from the partisan, mudslinging kinds of attacks on federal government, and the federal government debating with the provincial government what the share of the spending is, and just start by talking a little bit about the kinds of concerns that I hear from people in this province about access to health care, because the concerns of people are very real.

If you go out to any of the 100-plus communities that have an undersupply of family doctors and talk to any of the 25% of Ontario citizens who don't have a family doctor, they'll tell you that they're worried about whether they're going to be able to get access to the health care supports they need 24 hours a day, seven days a week. That's almost a mirage for those people. They just want to know that they've got a family doctor, somebody they can call when they're concerned about illness and a family member. That's one of the concerns I hear.

I hear from people who are concerned that if there's a trauma, a serious illness or an accident, they're not going to be taken to the nearest emergency room, that the ambulance is going to have to bypass and go to another hospital at some greater distance because the emergency rooms are overcrowded and they're on critical care bypass. That is still the situation today, even though the flu epidemic is no longer a reality.

People are concerned about the situation that happened to the woman from Brampton just two weeks ago, going into premature labour with twins, a high-risk delivery anticipated, and there was no bed for that woman in any hospital in the greater Toronto area. The country's largest metropolitan area had no bed for a high-risk pregnancy, and a woman in labour—

*Interjection.*

**Interjection:** That's the way it should be.

**Mrs McLeod:** —had to be flown to Ottawa.

Four hundred and fifty kilometres away and the member opposite says, "That's the way it should be"? No bed in the greater metropolitan area for a woman who's going into premature labour? No wonder people are concerned about the state of health care in Ontario today.

People are concerned about long delays for surgery. People are concerned about surgery being cancelled because there's either no critical care bed, or there's no anesthetist or there's no specialized nurse to provide the care, because this, after all, is the government that



thought we could lay off 10,000 nurses and is now surprised to find this difficulty hiring them back.

But one of the most tragic cases I heard about this fall was a man who called our office who was due to have a lung transplant. We know that this government, as part of their so-called reforms, has urged that there be more donors for transplants. This particular lung transplant never happened and the lung was lost because there was no critical care bed for that lung transplant to take place in Toronto.

People are concerned about not being able to get cancer care at home. This is an advertisement that I found, I believe in the *Globe and Mail*, this winter. It says: "Attention cancer patients. Why wait months for treatment you need now? Treatment may be available for you in the US." It says, "Contact [cancercare4u.com](http://cancercare4u.com)" and "inquire about OHIP coverage." The Ontario government, because of the crisis they created in cancer care, is having to send cancer patients to the United States to get the care that people believe they should have here at home.

Those are just some of the concerns I hear from Ontarians who are genuinely concerned about the health care system in Ontario. They are concerned. They know the system, as they see it in Ontario in terms of their access to that system, is in trouble, and they do want their governments to respond. I think people want from government a very clear commitment to protect the medicare that the people of this province and of this country want to protect. They value it. They want to protect it. I think they want a willingness from both the provincial governments and the federal government to work together for health care, to stop fighting about health care and start fighting for health care, as our leader said yesterday in this Legislature.

I think they want more than words, as the Premier suggested today, but they want more than words from both levels of government. They do not want more finger-pointing, more blame-laying, more pass-the-buck kinds of cop-out for dealing with effective management of health care in the province of Ontario, and that's what this motion is all about. It is nothing more than that. It is nothing more than finger-pointing, infighting, partisan buck-passing abdication of responsibility for health care in Ontario.

This motion is absolutely nothing about making a real commitment to health care. It's like the advertising, yet again a \$3-million taxpayer-paid advertising campaign to try and convince the Ontario public that black is somehow white or grey or something in the middle. False advertising, I would suggest, because the advertising, as I recall—both the television ads and the brochure that I got in my home the other day—talks about a plan. It seems to me that just last week the government's own duly appointed commissioner, the head of the Health Services Restructuring Commission, the very body that was to develop the plan that this government would implement, said quite openly, quite publicly, that this government had no plan, that it had no vision, and that it's very

difficult to get where you're going if you don't know where you're going. So how can this government advertise its plan, let alone use \$3 million of taxpayers' money to do that?

Our leader presented a motion yesterday in which he condemned both levels of government for spending taxpayers' money in a blatantly partisan attack on one another—an advertising war—when that money was needed for health care. Our leader's resolution agreed that there needed to be more money put into health care, more money from both levels of government. His motion read, "The current levels of health care funding provided by both the federal and provincial governments are insufficient to properly modernize Ontario's health care services and to provide the quality care that Ontarians need and deserve."

I don't like the health care cuts that the federal government made. I don't want to see health care cuts by any level of government. And no, I don't believe that there was enough money for health care in the last federal budget. I wanted to see more money for health care. I will put my money on money for health care before I will put money into tax cuts. I've said it to the Harris government time and time again, and I would say it in terms of the federal government's choices of how much money they're prepared to put into health care, whether we believe more money should go to health care.

I look at the most recent statistics we have in terms of international comparison, 1997, when Canada was 19th in an international comparison in terms of its real per capita spending on health care. The increases in health care spending that the federal government has made in the last two budgets will have changed that position somewhat, I suspect. I don't have most recent numbers, so I want to acknowledge that we may no longer be 19th. There has been an increase in funding since those numbers were presented. But I think that as 19th in an international comparison, we as a country have some room to move to provide more funding for health care, if medicare is indeed one of our most fundamental values and of highest priority to Canadians.

Then I look at that figure and I look at Ontario. Ontario, which in 1992 was the second-highest per capita spender on health care in the country, by 1998 had slipped to being the sixth-highest spender. Sixth place—only four provinces in this country spending less per capita than Ontario. Again, I will acknowledge that there has been some increase in health care spending in Ontario. There will also have been increases in other provinces, and I haven't seen the comparisons since 1998. But to slip from second to sixth under the watch of this Harris government says to me that the Harris government is not on a very strong platform to lecture any other level of government, provincial or federal, on its lack of commitment to really increasing health care spending on a per capita basis.

I hear the arguments, the debate that's going on, I see the advertising, I hear the discussion about provincial governments not wanting to acknowledge tax points, and

the federal government says, "Indeed, we have raised the level of health care transfers to the province back to where they were at the peak point if you include the tax points," and I think there's truth in that, most definitely. I hear the provincial government saying: "Don't talk to us about tax points. That doesn't count; it's not cash." It was pointed out to me earlier today in a transcript of Hansard that it was Frank Miller, our previous Conservative Premier, who argued that there should be more transfers through tax points rather than cash, because indeed it gave more flexibility to the provinces to do with those dollars what they felt was most appropriate. I don't think that's a debate we really need to get into in this House, because I don't think that's the public's concern.

I think you could argue the numbers—11 cents from this government—although I noticed that the member opposite used seven cents. The numbers seem to change on a regular basis, but that's the proportion of the federal spending on health care in Ontario. The federal government says, "No, it's more like 33 cents," or perhaps something higher than that. Nobody knows. You make assumptions about how much of each province's transfers is actually going to health, as opposed to post-secondary education or welfare. We can have a long debate about what the balance should be of dollars going to each of those areas. I don't think that's what matters to people in Ontario when it comes to health care. All they know for sure is that they can't get the care they need when and where they need it. Surely that should be the focus of this debate.

What needs to happen so that the people of this province start to have a renewed confidence that when they need to access our health care system, they're going to be able to get that care? I believe, as my leader suggested in his motion yesterday, that there needs to be additional funding from both federal and provincial governments to provide adequate health care for Ontarians and for Canadians. I also feel very strongly that if there is to be additional funding from the federal government to the province of Ontario under Mike Harris's watch, it has to be absolutely clear, signed on the bottom line, what that money is, how much it is, where it is going to be spent and how it is going to be spent.

The flexibility that Frank Miller argued for and that other provincial premiers argued for some years ago might have worked if you believed that there was a real commitment to use all the available dollars for health care. But I don't trust the Mike Harris government when it comes to health care, and I think I've got lots of evidence as to why my lack of trust has some basis. I just look at the shell game that the Harris government has played for the last year alone—I'm not going to go back beyond just the last year—with health care numbers. This is a government that promised absolutely, in its campaign and in its budget papers the week before the campaign, that it was going to spend \$1.6 billion on health care; \$945 million was going to come from the federal government and another \$700 million was going to come from the province itself.

When you actually looked at the budget documents, what you found out was that the government had played this kind of shell game where some \$1 billion in what they called one-time funding had just kind of disappeared. We never did find out which shell it was under. So, in fact, the Harris government didn't increase its health care spending in its budget estimates by \$1.6 billion; it increased it by \$332 million. Nice work if you can get it: Claim you're spending \$1.6 billion, take \$945 million from the federal government as part of that and then use about \$1 billion to help pay for the next instalment of the tax cut. Well, that was the budget plan.

Then there was another shell game. The third-quarter finances came out, and I think there was some anxiety about the examination that was being done of those original budget figures. So we had another little bit of a magic manoeuvre with the numbers and we found that, my goodness, they hadn't spent as much in 1998-99 as they thought, maybe about \$300 million less than they intended to spend. Numbers, you know; if you just put them in your budget and you don't spend them, it's pretty easy to move them from year to year. So about \$300 million less was spent in 1998-99, and another close to \$300 million that was planned to be spent in this current budget year hasn't actually been spent yet. The dollars haven't actually gone out. It's just a shell game with numbers to make it look as though maybe the government was increasing its health care spending by more like \$887 million—still short, well short of the \$1.6 billion they said they would spend on health care this year, and even short of the \$945 million that was transferred to them from the federal government.

1650

On top of that, I think we should, in fairness to the federal government, point out that this government, that is now launching motions and running advertising campaigns condemning the federal government for not providing enough money to Ontario for health care, chose—deliberately chose—not to take the money that was available from the federal government last year. They could have taken \$1.5 billion. They chose instead to take \$945 million. Why? Why was a government that is now launching advertising campaigns to demand more money from the federal government not prepared to take the money that was available to them last year? One reason: Because this Harris government didn't want to increase the spending on health care by that much. They wanted to keep the spending levels down.

I guess that makes me very nervous about asking for any money from the federal government and receiving it without there being an absolute guarantee that every cent of new money that I want to see and they want to see from the federal government will be in addition to the commitments that were made in the Harris campaign to increase health care spending by 20% over the next four years and to have \$22.78 billion spent on health care by 2003-04, regardless of what funds the federal government transfers in that time. The Minister of Health was not prepared to make that commitment in her press



conference last week. She was not prepared to guarantee that new federal funding would be in addition to the commitment they had made. But surely if the government believes, as their motion suggests, that this issue of health care needs more dollars, they should be prepared to make a commitment up front that any new federal funding from this point on will be in addition to the \$22.78 billion that they've committed to spend by 2003-04.

We've heard from the government members today a long litany of the reforms which they claim to have been introducing in the province of Ontario and which they want the federal minister to understand and to support financially. I too want to call on the federal minister to support real reforms in Ontario. I want to call on the federal government to support real reform in Ontario. I want to call on the Harris government to start to understand what real reform in the province of Ontario in health care might actually mean.

I would like the Harris government to acknowledge, for example, that if you want to bring about real reform in the way we provide health care, if you want to do that through the notion that you restructure hospitals and provide care in an appropriate setting in the community, where it is less costly than providing care in the hospital, you have to start by investing in community care. You can't start by taking \$800 million out of the hospital budgets, creating chaos in the hospital system and dumping the people who are being discharged out of hospitals earlier, sicker and quicker, on to a community care system that is barely up and running to provide support to the frail elderly. This is not reform; this is sheer chaos. That's what we've had in hospital restructuring in Ontario.

Talk to anybody who is involved with community care. Have we had real reform in community care in Ontario over the last four years? No, we have not. What we have had is an offloading from acute care hospitals whose budgets were stretched beyond their limits on to the community care, people being discharged out of hospital early, and virtually all of the dollars that have been given to the community care access centres to provide community support in the home are going to provide acute care for people who have been discharged out of hospital early.

Community care reform means providing support for those who are frail and elderly so they don't fall and break a hip and end up in hospital. You have to have those supports in place before you know how much of your acute care you're going to be able to move out to the community. You don't cut the acute care first, before the community supports are in place. You don't shut down hospital beds on the grounds that, "Many of the people who are currently in acute care hospitals should be in long-term-care settings or chronic care settings, so we'll shut down the acute care beds and move them into chronic beds or long-term-care beds." You don't do that if you're already shutting down 40% of your chronic care beds, and your long-term-care beds have waiting lists of 18,000 people. You say, "Don't worry, we're going to

build 18,000 long-term-care beds," except you shut the acute care beds down first and there's no place for people to go. There are no beds out there. That's not how you reform a system. If you're going to reform a system, you invest in the community care, you invest in the long-term care, and then you begin to realize the savings in the acute care sector.

That's not how this government did it. The government put the cart before the horse. They were so determined to get \$800 million out of hospitals so they didn't have to put any new money into health care, so they could use every dollar they could find for their tax cut, that they just made the cuts first and hoped the rest would sort out. That's not reform and it certainly isn't a plan.

The government has talked about primary care reform. It's our belief on this side of the House that when it comes to primary care reform, to actually providing access to 24-hour care seven days a week, this government is moving almost nowhere at a very slow pace.

I believe there are currently some 65 communities that have requested community health centres. If the government was serious about primary care reform, they wouldn't focus all their efforts solely on the Ontario Medical Association negotiation table. They wouldn't feel they have to have the approval of the OMA for every step that was taken. They could look at some other ways of moving forward. Why could they not look at some of those 65 proposals for community health centres? Why could they not look at how community health centre models might actually be integrated with other models of primary care reform? The whole issue is, how do you get care to people in a community? Surely the government doesn't have to go tiny step by tiny step when 65 communities, as I understand it, have asked to move forward in a very positive direction?

There are going to be some very real limitations to what can be achieved in primary care reform because we have a very serious shortage of family doctors, who are extremely important to primary care reform; another area where the government has virtually refused to acknowledge the reality of the shortage. Now that we have a report from Dr Robert McKendry that came in shortly before Christmas that says, "Yes, Minister of Health, yes, Premier, there is a shortage of family doctors and other specialists," the government is still reluctant to move ahead with any sense of urgency to deal with a problem that will really get in the way of access to 24-hour care seven days a week.

Those are just a handful of the areas in which I think there is an opportunity for real reform in health care, an important opportunity that should be seized by the Harris government as well as by the federal government. Yet the Harris government has not been prepared to move in a way which constitutes real reform or is the basis for truly positive change.

I was intrigued to hear the Premier of this province one day about two weeks ago describe himself in virtually one breath, one sentence, saying that he had been a

defender of medicare from the day he was born—which is intriguing because medicare hadn't actually been developed as a concept at the time he was born, but he must have been quite prescient—but he would have no alternative but to privatize health care.

I believe the concern about funding in health care becomes the reason, the excuse I should say, for the Harris government to move ahead, which has truly been its real agenda from the day it took office. I believe the Harris government, from the day it took office, has been more concerned with creating a crisis in confidence in publicly funded health care than in building confidence in publicly funded health care.

I believe this government truly believes that the answer to the problems and the challenges facing medicare is to move increasingly to privatized, for-profit medicine and ultimately to private-pay. Ontario has the highest rate, along with Alberta—let me qualify that; I believe Alberta may be as high—of privately paid for health care in the country. By the ministry's own figures, 41% of the total spending on health care in this province is paid for privately. We have seen under the Harris regime more and more delisting, more and more costs of health care being paid for out of people's private pockets. No wonder they need tax cuts to help pay for the health care that's being increasingly privatized.

1700

It shouldn't have come as a surprise to any of us that one of the first acts of the Harris government was to change the Independent Health Facilities Act to take away a preference for not-for-profit Canadian companies. That preference had to be given in licensing any new independent health facilities under the old act. The Harris government changed it. They changed it also in such a way that there didn't have to be any public process for giving a licence for new independent health facilities. The Minister of Health can decide who gets to set up a new independent health facility, and can do it without anybody knowing what's happening and without any preference for not-for-profit Canadian care.

The Harris government was ahead of Ralph Klein in Alberta. Ralph Klein hasn't even dared to go as far as Mike Harris just quietly went with legislative change, creating a clear legal field, opening the door wide to what I believe they want to do, which is increasingly to privatize health care in this province and increasingly to have health care provided through for-profit American companies. I understand Ernie Eves says that user fees are the answer, that that's the way to go. We should have user fees; I understand that was a suggestion he made at a recent Tory convention.

I believe we have to stop fighting about health care and start fighting for health care. I want to take all the words about the commitment that people have, the fact that we need to have more resources, and see them translated into a real commitment to improving health care, access to health care and to bringing about real reform.

To bring about real reform we need investment upfront. If this government and the federal government

are serious about change, about reform, about protecting medicare, there will need to be a commitment of funding from both levels of government. There will need to be a real plan, not something advertised that doesn't actually exist. Both levels of government will need to set aside the blame-laying, the federal-bashing and the buck-passing and find some way of working together to develop a positive way forward. That's what I believe we need.

But if this government is determined at this moment in time to debate and vote on what is clearly a partisan federal-bashing, blame-laying motion, I think the motion should at least be fair and balanced. With that in mind, I would like to move an amendment to the motion. I would like to move the following motion:

That Mr Harris's resolution be amended by deleting parts (a), (b) and (d) and substituting the following sections, which would then read:

"That the Legislative Assembly of Ontario

"(a) Condemns the Harris government for its finger pointing, blame-laying and complete failure to accept responsibility for the management of health care in the province of Ontario;

"(b) Further condemns the Harris government for launching an irresponsible advertising attack that uses taxpayer dollars for its own partisan purposes when those dollars are needed to improve health care for Ontario residents, and for falsely advertising that the Harris government has a plan for health care when the government's own commissioner has said that the government has no vision for health care;

"(d) Demands that the Harris government stops playing shell games with the health care budget figures, allocates all the currently available federal funding immediately to health care without reducing its commitment of provincial dollars and meets the commitment it made to actually increase the health care budget in 1999-2000 by \$1.6 billion instead of increasing it by only \$887 million."

And that it be further amended by adding the following sections:

"(e) Demands that the Harris government make a clear commitment that any new federal funding will be added to the commitment to increase health care spending to \$22.78 billion by 2003-04;

"(f) Demands the Harris government reverse the cuts to hospital budgets so the chaos of overcrowded emergency rooms and cancelled surgeries can be addressed, build long-term-care beds rather than simply reannouncing them, and adequately fund community care so that the entire budgets of the community care agencies are not going to support people who are being discharged early from hospital because of the lack of hospital beds and so that there are funds to meet the needs of the frail elderly population;

"(g) Demands the Harris government make an immediate commitment to move forward with primary care reform to ensure that people can have access to care 24 hours a day, seven days a week;



"(h) Demands the Mike Harris government make a commitment to providing health care for people close to home, rather than creating the crises that are forcing cancer patients to go to the United States for care;

"(i) Demands the Mike Harris government acknowledge the growing crisis in access to cancer care in chemotherapy and cancer surgery and take immediate steps to avert this crisis;

"(j) Demands the Mike Harris government take meaningful and immediate action to address the shortage of physicians which has led to a crisis in access to care in 100 communities across this province;

"(k) Demands Mike Harris stop posturing as a defender of medicare when his government has been moving more and more to private health care and has been deliberately opening the door to for-profit American companies; and

"(l) Demands that both the federal government and the provincial government stop fighting about health care and start fighting for health care."

**The Acting Speaker:** Mrs McLeod has moved—dispense? Further debate?

**Mr Tilson:** On a point of order, Mr Speaker: I submit that the amendment is totally out of order. It substantially changes the content of the resolution. In fact, it rewrites the resolution with the Liberal Party's own resolution. If they want to put forward their own resolution, they should wait for a day when they can debate their resolution. But they can't simply rewrite the resolution totally. That is what they have done.

**Mrs McLeod:** Mr Speaker, I disagree. Section (c) of the resolution "urges the government of Canada immediately to restore permanently the health funding it has cut and to assume its fair share of increased ongoing funding to meet the health needs of our country's aging and growing population," which I had thought, from the debate today, was the crux of the government's motion.

**The Acting Speaker:** I would rule that the amendment is in order, and point out that according to Erskine May, "The object of an amendment may be either to modify a question in such a way as to increase its acceptability or to present to the House a different proposition as an alternative to the original question."

Further debate?

**Mr Dwight Duncan (Windsor-St Clair):** I am pleased to join this debate and I begin by reiterating that Ontario Liberals have said, and we believe, that we need to fight for health care instead of fighting over health care.

Let me add my voice to the voices of members of our caucus in saying that I regret that the federal government did not have more cash for health care in its recent budget. I regret that. I believe they should have put more money into health care. I say that publicly today in this Legislature, as I have said it previously.

I would like to add that the purpose of our amendment to the resolution is so that members of the government don't forget that their government is in fact responsible for the management of health care in this province. It is

the position of the Ontario Liberal caucus that you ought to quit this fighting with the federal government and wasting taxpayers' money on useless advertising campaigns. I know a lot of people in my riding received this \$3-million piece of propaganda, \$3 million that could have been used in our emergency rooms in Windsor. It could have been used to prevent people in our country having to go to the United States to receive radiation therapy.

I think it's important that we on this side acknowledge the failure of the federal government to provide an adequate enough increase for health care to the provinces in its recent budget. But for the Harris gang to somehow abdicate or try to deny the damage they have single-handedly done to our health care system—let us examine the record, as has my colleague from Thunder Bay-Atikokan.

First, cuts were implemented to operating budgets for hospitals. Second, community care access centres—funds are not keeping pace with the growth in demand. Just this winter, one of my constituents, a frail, elderly blind man, had his homemaking service cut. What happened? He had to start preparing his own meals. And guess what? His apartment caught fire and he was almost killed. We can go through those examples, and we will, because with this resolution—we know how much the government want to talk about this. We'd like to talk about this so that each member of our caucus can get an hour of time to talk about the situations in their ridings.

We know you won't use closure to stop this debate. We know you won't try to use closure, because you wanted this debate, and we want to debate this for another month too. We want to have an hour each, and we're going to ask that each of our members have an hour to talk about these and many other examples in their own ridings.

1710

Your know, the absolute hypocrisy of this government, of the Tory government in this province, that has gutted our health care system and doesn't want to take—

**The Acting Speaker:** You might want to reconsider the word "hypocrisy."

**Mr Duncan:** Certainly, Mr Speaker.

The creative verve of this government in its attempt to try and diminish its role in diminishing our health care—

*Interjections.*

**The Acting Speaker:** You have to withdraw the word "hypocrisy."

**Mr Duncan:** I withdraw the word "hypocrisy."

Again, the absolute irony of the situation will not fall on deaf ears in this province. It was the Harris government that has mismanaged health care in the last five years. There's no question about that, first and foremost. It is Harris and his band of merry men and women who are forcing cancer patients to go to the US for treatment. It is Harris and his band of merry men and merry women who have so messed up our home care system that people in our province, whether they be frail elderly or recently released patients from hospitals, can't depend on quality

home care for themselves and their families at this difficult time. We want to debate those points as well, and that is the purpose of our amendment today.

It is always so challenging to listen to the Premier in this House talk about his heartfelt concern, a heartfelt concern that appears to be missing. I remember very well in December 1992 the then leader of the third party telling the then Premier of Ontario to quit whining about federal transfer payments, that, "We have the money," that, "Ontario can be the master of its own destiny and its own fate." My, how times have changed. He had the fist then too, just like that: "Quit your whining. Ontario can do it all on its own." What an absolute joke.

You don't have to go far from this chamber to see the damage that's been done to our health care system by the Harris government. We intend to talk about that, hopefully for the next 35 or 40 days, on the floor of this Legislature, case by case, because you have systematically prevented the opposition from having its day. You have systematically denied us the opportunity to have a meaningful debate on health care. Instead, you replace it with this cheap partisan grandstanding that's serving no one's interests—certainly not the interests of health care users in the province of Ontario. We will hold your feet to the fire, because I know you will not have the guts to bring in closure now. You won't, because you wanted this debate. You put it on the floor and now we're going to hold you to it and we're going to talk about it for 35 days because the truth of the matter is you're both responsible, you and the federal guys.

You know what? We're going to set it right, but we're going to do it in the context of our debate tonight. I'll remind members opposite that according to the rules of this Legislature, you have to debate the amendment that's on the floor, not the resolution. We intend to keep talking about that amendment. We intend to keep talking about it tonight and tomorrow and the day after. We'll go for 40 days. We want to, just like we know you want to.

It's sad, really, that it has come to this. It's sad, really, that the government of Ontario would resort to cheap advertising, cheap partisanship at the expense of a meaningful debate as to how to fix our health care system. In those 30 or 40 days of debate we're going to talk about our 24-7 plan—24 hours a day, seven days a week of quality, accessible health care for everybody in Ontario—and we will lay out the details of what we stand for, instead of this cheap nonsense that reinforces the cynicism the public feels toward politicians going like this, blaming each other, instead of sitting down in a meaningful way, debating the issues and arriving at consensus positions.

Your minister undermined that health ministers' conference by her intransigence and by the intransigence of your government. We're going to hold you to account for it in the next 35 or 40 days on this issue. We're just delighted you gave us the opportunity to do that.

**The Acting Speaker:** Further debate?

**Mrs Sandra Pupatello (Windsor West):** I am delighted that this government chose to put health care on

the floor of this Legislature so we can debate it, because time after time and week after week we asked the Premier to reconvene this Legislature so that we could come back in here and tell you what was happening at home, in every one of our home ridings, which have been dealing with issue after issue of hallway medicine, where I come from and where every member of this House comes from. Finally, this government chooses to bring a motion like this to the floor, and thankfully we have prepared amendments to speak to the real truth about the tragedy of health care in Ontario.

What we have in Ontario is a health act that governs hospitals. It's the hospital act for Ontario. That is an Ontario law, made for and controlled by the government of Ontario, as to how hospitals are to be run, the policies and regulations around those hospitals. That means what has happened to hospitals in Ontario for the last five years is at your feet, so you can't throw stones when you live in glass houses.

I wanted to ask the government, how dare they choose to speak out of both sides of their mouths, like they've been doing for the last several months, and try to shift the blame to some other level of government. At the same time, you select more partisan advertising—a waste, dollar for dollar, on government ads like these fancy coloured brochures that are arriving at every household in Ontario—instead of serving the needs of the people in Windsor, instead of the people who are in the St John's wing of Hotel-Dieu Grace Hospital right now, being serviced by only a few nurses who are being absolutely run off their feet because we don't have enough nurses in our hospitals.

I wanted to ask this Premier, who wants to bring this debate today to this floor, why, when we have a job fair for nurses at my university in Windsor, we have every American hospital there to pilfer our nurses away, and our Windsor hospitals aren't there to try to keep our nurses at home. Because the only nurses they're hiring are part-time, casual nurses, when our hospitals are desperate for more hands on our patients. That's what this debate should be about today. That's what the Ontario Liberal Party believes in: actually providing service to people in health care.

Tell me why all of us should be relaxing at home in front of the Frasier show on television, and suddenly what appears is another government ad on television, right in the middle of prime time. How can this government possibly afford that out of Ministry of Health dollars? Prime time, during the news segment, I've got to watch another government advertisement on health care so that you can bemoan your position, when you drive the ship in Ontario health care, that is, the hospital act of Ontario.

You talk about bringing in amendments to the Long-Term Care Act because you govern home care in Ontario. You are responsible for these community care access centres that are delivering home care to our patients because the hospitals, self-acknowledged, are throwing the patients out sooner and sicker than ever



before. Now you've created this monster everywhere in Ontario to deliver home care into the home so that when these people leave the hospital they're supposed to have a nurse within a half hour of their arrival home. These families are up until midnight because the nurses aren't coming, because they don't have the nurses, because those private institutions won the bidding practice that you put in motion, and they didn't have the requirements and enough nurses on staff to cover the workload. That's what this government has been responsible for, and you've got the gall today to talk about health care.

We want to talk about health care. We will be talking about health care. You bring forward motion after motion and I will give you case after case of your laws that did not work and your funding that has let us down time after time. Next time I sit down in front of the *Frasier* show, I want to know how you wasted hundreds of thousands of dollars on an ad on television instead of the nurses in the St John's wing of Hotel-Dieu Grace Hospital. I want to know why we don't have enough maintenance staff in our hospitals, why I have to see dirt on the floor in my hospitals, and not just in Windsor. I'm talking about dirt on the floor in every hospital in Ontario. The place that's supposed to be the most clean has dirt on the floors across Ontario. That's your legacy to Ontario's health care, and you've got the nerve to want to call Paul Martin and talk about the budget federally?

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We want to talk about the hospital act of Ontario and what obligations you have as a government to your people right here. How much more about health care do you want to talk about? How many more examples do we have to bring you of people who cannot walk, cannot talk, cannot see? Your government chose to allow community care access centres to cut homemaking services. So this blind man my colleague just spoke of tries to boil his own soup on the stove and practically sets the house on fire. The firefighters appear because they know, they got a 911 call. The place is practically burning down because this man can't care for himself. That's your act.

That is a government that instituted a home care policy with no standards, no appropriate procedures, and you let the horse out of the barn without having that in place. This isn't just happening in Windsor. It is happening across the board in this province. Tell me why, when you own the hospital act of Ontario and are charged with the policy that regulates our hospitals, all of a sudden, since 1995 when Mike Harris took over as Premier of this province, we have 50% of our Ontario hospitals in debt. That is new, and that is new under your watch. It is you that funds our hospitals.

It is you that took \$5 million out of an ORC sale that should have gone to our Ontario hospitals. Day after day we'll hear case after case of money that you let fly out the window through the Ontario Realty Corp while our minister sits there babbling on and on with some notes prepared by his staff—the legions of staff—telling us about how appropriate that process was, that we're flipping Ontario property: one day for \$1 million, sold

the next day for \$5 million. And you want to talk to me about requiring health care dollars? You want to talk about flipping properties at a profit for the private resident at the expense of the Ontario taxpayer? You want to talk about advertising—full-colour brochures to every household in Ontario—about health care, and you've got the gall to be talking about federal dollars in the same breath? The federal government shouldn't give you money. You don't know what to do with it.

All we can say is that at the same time that we see a meteoric rise in salary of various positions—

*Interjections.*

**The Acting Speaker:** Order. One speaker at a time. The member for Windsor West.

**Mrs Pupatello:** Thank you kindly, Speaker. Clearly they don't want to hear the real story behind health care in Ontario. Clearly this government doesn't want the public of Ontario to know who is in charge of health care. Let me tell the people of Windsor West what they know full well.

The Ontario government has an act called the hospitals act, and they have another act called the Long-Term Care Act which they think they're going to amend now to make it better. They fund our hospitals. It's this government that does it, this government that made choices, bad choices—so bad, in fact, that in 1996 my private member's bill was supported, including by some members of the Conservative Party, and passed in this very House. That was to change the order of things in health care in Ontario and it was supported by these members of this House at that time. The tie was broken by the Speaker at that time. That's because you saw what was happening under your watch. I would ask this House today to continue the debate on health care because we have much more to say.

**Mr Dominic Agostino (Hamilton East):** I'm pleased to join the debate. I first of all congratulate our health critic, the member for Thunder Bay, and my colleagues for what they've added to the debate and to the very reasonable and very well thought-out amendment that has been added, unlike this partisan, one-sided political attack resolution brought forward by Premier Harris.

To add to what my colleagues have said, we certainly hope this debate goes on. As the whip for the official opposition, I have had a request from every single member in our caucus to speak for an hour. We certainly hope that the government will give us the 30 or 35 days we need to do this because this is an important debate. The government has to deal with it.

*Interjections.*

**Mr Agostino:** It is an important debate. I know that colleagues are laughing and heckling across the floor, because they don't believe health care is serious. They don't believe the health care debate in this province is serious. What they're more concerned about is pointing fingers.

The reality is this. I will admit, as my other colleagues have, that the federal government has not done enough. We know that. We understand that. But we also under-

stand that health care is a responsibility of both the federal and provincial governments and the way we're going to resolve this problem is by working together, not by simply trying to point fingers, as you have and as Minister Witmer has. She basically hijacked and disrupted the health ministers' conference here in Ontario, where clearly, as some ministers were working for a solution, Elizabeth Witmer was just too busy out there being propped up and being the puppet of Mike Harris to go out and spin the Mike Harris line every single day of simply attacking Jean Chrétien. I'm glad the minister has joined us for this debate, because she could have added constructive dialogue.

I'll give credit to the Minister of Health in British Columbia. I'll give credit to Michael Farnworth, who I think was the only minister who came out of those meetings and said: "Look, we can't just simply point fingers at each other. This is too important. We've got to work together." Our minister didn't say that. Our Premier didn't say that. This resolution today simply adds to that. Instead of bringing forward a resolution that would encourage the federal government and the provinces to work together to find some solutions to health and to the problems we're having today, we have this one-sided resolution.

I find it ironic that Mike Harris, who, as my colleague pointed out earlier, chastised Premier Rae for pointing the finger at the federal government, has now become the biggest whiner in the history of this province. Whine, whine—that's all he ever does. Remember Mike Harris when the budget was brought down by Paul Martin and cuts were made. He said, "It's a step in the right direction, but it's not enough." That was Mike Harris a few years ago. It was not enough. The cuts were not enough. That was what your Premier said. Then during the election, you know what? He took all the federal money which he didn't use for health care and used it as part of his election platform and then said, "We're going to fix health care with or without the federal government." That was your Premier.

Now he gets the heat. He realizes the decisions made by this government in health care are destructive to Ontarians and to the health of Ontarians. So what does he do? He does what Mike Harris does best: He plays the blame game. For health care, it's the nurses, it's the federal government. For education, it's the school boards, it's the teachers—on and on. Every single problem Mike Harris faces, he's got to point the finger somewhere else because he doesn't have the guts and the courage to take the responsibility for decisions he has made.

We have seen the examples in our community. Hamilton has been devastated by the cuts to health care as a result of this government. Right now our community is in a crisis over the potential closure of emergency services at the Henderson hospital. My colleague the member for Hamilton Mountain, Marie Bountrogianni, has led the fight and is continuing to lead the fight to try to convince this government to ante up more money and to give us what we need in Hamilton. The Hamilton

Health Sciences Corp has a \$41-million debt. Do you know why? It's because they have chosen, despite the massive cuts by this government to health care in our community, to carry on programs.

One example: This government—and you talk about the wisdom of the policies you bring in—allocated 50 of what are really heart-saving devices, basically implantable defibrillators that can save lives, that have been proven very effective in saving heart attack victims from repeat heart attacks. This government says, "We're going to give you 50 a year." They ran out of these 50 life-saving devices by September. If we followed your government policy, every other person who walked in the door and needed one of those: "Sorry, we can't do it. We don't have the money. You can go off and take your chances and maybe die." What did they do? They went out and purchased as much as they needed to ensure that every single person who walked in through that door had one of these life-saving devices available to them. Those are the kinds of decisions that have led to the situation we're in today. Again, had it been left to you, people would have died because they would not have had access to that. That is one example.

I can tell you that tomorrow my colleague from Hamilton Mountain is bringing hundreds of people into this Legislature so that you can see the faces and talk to the people who have been impacted by your decision, who are going to lose an emergency department and are going to lose extensive services and possibly a cancer centre on Hamilton Mountain because of your decisions. You can't run away from that. As much as the minister, Ms Witmer, likes to blame everyone else, the reality is it's her responsibility. It's her decisions and your government's decisions that are forcing the problems at the Henderson hospital on the mountain.

We've seen the crisis in the emergency departments. We've seen the ambulances in Hamilton on redirect 20% to 25% of the time in the last year; 20% to 25% every single day, Hamilton hospitals are either on redirect or critical care bypass. That's the situation you have forced us into today.

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The federal government is wrong in spending money on ads attacking Mike Harris. Mike Harris is also wrong in spending \$3 million on ads attacking the federal government. Just a single round of ads would have hired 60 nurses for one year; 60 additional nurses for one year would have been hired. Instead, Mike Harris thinks it's more important to spend that \$3 million on pointing fingers rather than hiring nurses.

Most Ontarians, if you ask them, will tell you they'd rather have that \$3 million being put into front-line health care services. That is the priority of Ontarians, not the priority of this government. You talk about priorities. You claim you don't have enough money for health care, but you have \$5 billion a year that you can give for tax cuts to your richest friends. You talk about priorities: \$3 million on ads rather than hiring nurses. You talk about priorities: \$5 billion—billion with a b—dollars a year on



tax cuts. Even if you put half of that money back into the health care system, you'd alleviate many of the problems we're facing today. So again it's a question of what's important to you and to this government.

I believe there is, as there was in education, a deliberate attempt by the Mike Harris government to put health care in such a state of crisis that people will start thinking and looking at options that, frankly, were unthinkable before.

You have taken a page out of the Ralph Klein book. There's no doubt in my mind, as you have privatized many parts of the health care system already, that you would love nothing more than to attempt what Mr Klein is attempting, and even worse, to bring in an American-style health care system here in Ontario. That's what you're trying to do, and you're doing it through the back door. You're doing it by creating enough chaos, making sure there are enough problems that people are going to say, "Hang on, we need some radical changes." I don't think that's an accident. I believe there's a deliberate strategy here. It is dangerous. It's playing with the lives of Ontarians. We have fought for years, on all sides of the House, previous to this government's idea of dealing with health care, for universal medicare across this country and across this province, and you are single-handedly attempting to destroy that principle. You want the American-style system because your friends can benefit.

We've seen the contracts that have gone out on home care. We've seen the contracts that have gone to many other areas you've privatized, to all your big donors. People who donate significantly to your party just happen, by coincidence, to also be receiving many of these contracts.

I don't want American health care in this province or in this country. I can tell you horror stories, because I've got friends who work in the American health care system, particularly a story told to me by a friend who works in a hospital in Miami. He is so disgusted that he's coming back here. He has been directed by doctors to bypass patients that are more seriously ill and look after patients that have bigger insurance policies, have more money and can pay more. That is the reality of the health care system when the private sector takes over. So often he's had to abandon someone who's seriously ill because their insurance policy only covers so much per day, and spend more time with someone who doesn't need as much help because their policy pays more. Is that what we want in this country? Is that the kind of health care system that we have built in this country over the years by all governments of all different political stripes? I think this is dangerous.

I think this debate is important. As I said earlier, I believe we should have 20, 30, 40 days of this debate, because Ontarians need to know what is happening with health care here. I think this one-sided attempt by the Premier is disgraceful. It's an insult to Ontarians, but more importantly, it's playing games, political games,

with people's lives. This is what our health care system is all about.

I would urge this government to look at it and work collectively with the federal government, with the other provinces, with all three parties in this House, to look at how we can best use the resources we have to maintain our health care system, to maintain a universal health care system and to maintain an Ontarian and Canadian system, not one that our friends south of the border have, which I detest and which is clearly against every principle that we as Canadians believe in when it comes to health care.

There is a way that this can be fixed. Our federal government needs to play a role in this debate. Our federal government should put more money into this. But Mike Harris then also has to guarantee that every single cent that gets transferred for health care goes into health care.

#### *Interjection.*

**Mr Agostino:** He hasn't done that yet. He has not done that. There has been money received for health care in this province that has been diverted to other areas. Harris can't even make that commitment.

I ask colleagues in the House to support the amendments made by my colleague from Thunder Bay. I believe it makes a great deal of sense. I believe it talks about working together. I believe it talks about both the federal government and the Harris government having a responsibility and having to take some of the blame here. But, more important, stop pointing fingers at each other. Start working toward health care for Ontarians, not trying to look at who's to blame for the situation we're in.

**Ms Frances Lankin (Beaches-East York):** I am absolutely thrilled to have an opportunity to do the leadoff for our caucus and spend the time that is allotted to me speaking about health care and health care reform and the directions that I think are so important for the sustainability of medicare.

I've been listening with some amusement. I'm sure some people would agree with me when I say maybe I've been here too long. I have a hard time when I hear members of this Legislative Assembly stand and say, "I want to have this discussion on a non-partisan basis"—I heard a member of the government speak to that; I heard a member of the official opposition speak to that—and then they go to rant about each other's positions and platforms, they go on to attack where it politically suits them: the government to attack the federal government or the official opposition to defend the federal government. None of that has much to do with what has to happen in health care and the reforms that need to happen in health care.

I believe we should support the resolution that is on the floor put forward by the government—although I also will be moving an amendment to it—for a pretty simple reason. It is clear that the federal government—and I don't include only the current federal Liberal government; the previous Conservative Mulroney government actually began the process of decreasing transfers to the

provinces, to the provinces of Alberta, British Columbia and Ontario. I believe that successive federal governments, by exiting the field of direct funding and share of funding of health care in this country, have abandoned the moral ground, as well as the fiscal clout they had, to enforce a national health care program. I believe medicare should be a national program with national standards, with national principles and national protection for those principles. When a federal government no longer transfers and shares in the funding, they have no ability to enforce the principles of the Canada Health Act.

I want to take people back to the time when then Prime Minister Mulroney began the process of decreasing transfers to the provinces. The then hysteria of the day was about deficits. The latest hysteria of the day has been about tax cuts. Now we're moving back into another hysteria of the day about the sustainability of medicare. These are old stories that keep coming around in the political cycle. Perhaps, as opposed to the finger-pointing across the floor that we've heard so far today, we could learn from some of the consensuses that have been built in the past, the truly non-partisan consensuses that were built in the past, in the days of provincial and federal accords around the direction of health care reform required to preserve medicare, and I believe with the genuine intent on the part of all governments of all political stripes in those days to actually preserve medicare. I no longer believe that that genuine intent is present in this country, and that's what worries me about the debate that we have entered into at this point in time.

Prime Minister Mulroney began the reduction in transfers by placing what was referred to fondly then, or not so fondly, as the cap on CAP, the Canada assistance plan.

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That was a cost-sharing program for social welfare. It was 50-50, much like the Premier talked about medicare when it was first introduced. But Prime Minister Mulroney determined at a certain point in time, in order to reduce federal expenditures to deal with the federal budget situation, that he was going to put a cap on the transfers to what he described as the three most prosperous provinces at the time: Ontario, Alberta and British Columbia. Over a period of years, the collective transfer payments for social welfare, health and education, in different pots but connected together, were beginning to be squeezed and squeezed. It meant that provinces no longer had the federal government as a partner with respect to those particularly important and very large budget items in provincial government budgets.

At the time, I remember the province of Ontario and the then Premier, Bob Rae, pointing out to this Legislative Assembly the road we were walking down, the problem that was inherent in that and the inability of the federal government to ensure that national standards would be maintained if we continued down that road.

I also remember at the time—just a little bit of irony, because I had this conversation earlier directly with

Premier Harris, reminding him of it. I remember him sitting in the front row, right in this section, the third party, looking at Premier Rae when he was talking about the cut in federal transfers and saying, "Sounds like whining to me." At the time we were in the midst of the greatest recession since the Great Depression. For the first time in the history of the province government revenues were actually declining from year to year. The institutionalized costs of government to take care of people, things like welfare programs, as people were losing their jobs as a result of the adjustment happening in our economy from free trade and other sorts of policies, the monetary policies of this country—high interest rates, propping up the dollar at that time, a number of things affecting the economy. I remember the now Premier, then the Leader of the Opposition, saying, "You don't have a revenue problem; you have a spending problem."

I remember the budget of the Ministry of Health, because I was honoured to be the Minister of Health at that time, a budget we were essentially flatlining for two to three years because of the huge fiscal problems facing the government of Ontario. Now we have a government that is committing to a 20% increase, and no one knows into what pocket, or into whose pocket, the money will go, as opposed to funding a vision of reform of the system, of restructuring the system to make it sustainable.

I remember him saying: "You don't have a revenue problem; you have a spending problem. Don't complain about the federal government. It sounds like whining to me. It's all one taxpayer." I want to remind us of that. It is all one taxpayer. It is one taxpayer whether it is the Ontario government that is giving away tax cuts or the federal government that is giving away tax cuts, all of them giving away their capacity to invest in health care, which they both seem to be saying needs more money. Go figure. There is a difficult imbalance in this equation that we see being put forward in Ontario with respect to this issue of funding of health care.

I find it interesting that in the view of the Minister of Health and the Premier, the restructuring of the health care system in this province began in 1995, and nothing was done before that date along the road to restructuring the health care system. I find it self-serving. I find it without class. If they were doctors, they'd be taking a Hippocratic oath. If I changed a letter to say what I really think, I'd be out of order. But that's what I think, in terms of how the government talks about what has gone on in the health care system in this province.

I remember, as Minister of Health, spending time talking about changes that were happening and, where appropriate, talking about the role of former Health Minister Murray Elston or former Health Minister Elinor Caplan. I remember bringing about a discussion within this province with respect to shifting resources from our hospitals, from our illness treatment system, to our illness prevention system. I remember taking some of the hard steps, going to the Ontario Hospital Association meeting



and saying boldly, to the shock of many people in that room, that 30% of what we do has no proven value, to get a debate going about the need to restructure hospitals.

I remember 30 communities that were in the process of hospital restructuring before this government took office, where they, through the process of imposing an outside body, simply took the responsibility away from the communities but ended up with much the same result in terms of the end product. Yet in many of those cases, they have not moved forward. I'm frankly tired of the rhetoric without substance and of the revisionist history that is being put forward.

I had the honour, as the current Minister of Health did last week, of attending federal-provincial ministers of health meetings. I remember the tremendous energy and excitement about the vision for reform in this country, which understood a number of key factors: that in order for medicare to be sustainable, the changes had to be made within the funds that were currently allocated to health spending in this country, understanding that there would be inflationary adjustments both for dollar inflation and for growth of population and aging of population and that we had to maintain appropriate increases in health spending to match that need, but understanding the huge pressure in the system that would occur as a result of a rapidly aging population and the need to spend the time to think through a wellness strategy that committed our resources to keeping people healthy instead of committing all our resources to waiting until they needed treatment.

That began with an understanding—again, one that was embraced across this country—of the determinants of health and an understanding that what we do in doctors' offices and in hospitals is only a small part of what builds a healthy population. If people are to be healthy, they need enough food to eat—they need appropriate nourishment; they need to live in conditions other than abject poverty; they need to have a roof over their head—suitable, decent housing; they need to have a job; they need to have a clean environment—there has to be clean water to drink, clean air to breathe, an absence of toxins, an absence of chemicals that induce cancers in their bodies.

The understanding of the need to invest in the determinants of health was an all so obvious but revolutionary moment in the debate about the preservation of public health care in this country. I have to say it is sad to see that we have lost our way in that debate. Without spending a great amount of time on it, I think even the government members would admit that cuts to welfare rates, an end to social housing programs and affordable housing programs, a cut to environmental regulations and the ability to enforce whatever regulations are left—all those things run contrary to the concept of investing in the determinants of health.

We've had impassioned pleas from people like Fraser Mustard about the need to invest in the early years. We've had some response from the government. But when such a large proportion of our children are living in

poverty, where their parents are struggling, losing their housing in order to give the kids enough to eat, and not necessarily good, nutritious food, and they're living in conditions that expose them to environmental factors that affect their health at such a young age, what do you think we're going to be facing in terms of population health five, 10, 15, 20, 25 or 50 years from now?

We are building into our future a generation whose health will be affected by the public policy decisions being taken today, at this time. You can't de-link those things, and you can't de-link them from the debate about health care. Simply talking about the need for the federal government to be at the table isn't enough in terms of our responsibility with respect to the future if we really are interested in preserving quality public health care and building healthy populations.

#### 1750

To the aspect of the federal government's role with respect to the Canada Health Act, to simply ask the federal government to reaffirm its principles in the Canada Health Act to my way of thinking is also not sufficient. Not only do they have to be players at the table with the dollars so that they can enforce national standards, but they need to understand that health care is changing under the very feet of the Canada Health Act. As we do less in hospitals and in doctors' offices and we do more in the community and in people's homes, those services in the community and in people's homes are not covered under the Canada Health Act. People think of them as part of the health care system, but what is insured by the principles of universality and portability and public administration are hospital services and doctors' services, not nurse practitioners, not chiropodists, not home care, not personal support, not nursing homes, not long-term-care beds.

As more of our services are provided in the community as a result of changes in technology and a change in pharmacological procedures, those services must be included under the Canada Health Act. The challenge to the federal government is not only to ante up their fair share at the table so that they have the moral and the fiscal clout to enforce a national medicare program; they must also make the changes necessary in the Canada Health Act to stop Alberta's Klein approach to privatizing health care, to stop the proliferation of privatization of services in long-term care and home care like we're seeing in Ontario.

That's why they need to be at the table. I'm sorry, but it's a game of chicken to say, "We won't put the money there until we have the guarantee back that it won't go on a tax cut," when they're spending their money on tax cuts as well. Let's stop the game of chicken. Let's have a real debate about our desire and Canadians' desire to preserve the public health care system and what it takes in terms of changes in public health care principles contained in the Canada Health Act.

My time is running out for today and I will have an opportunity to return to this when this item is next called for debate, but I do want to place on the floor an

amendment that we will be speaking to. This is now listed as an amendment to the amendment by adding the following words:

"And that the government of Ontario adopts the following four principles: A ban on Ralph Klein-style private, for-profit hospitals; a freeze on the delisting of health services; an end to the proliferation of private, for-profit long-term care and home care and a tougher inspection system and stiffer penalties for independent health facilities."

I will have an opportunity to speak to that at more length, but I want to say that the amendment that has already been put forward on the floor by the official opposition is one that I'm quite sure while it is fun to—

**The Acting Speaker:** We'll just get the amendment on the record. Ms Lankin has moved an amendment to the amendment by adding:

"And that the government of Ontario adopts the following four principles—

**Ms Lankin:** Dispense.

**Mr Duncan:** No.

**The Acting Speaker:** "And that the government of Ontario adopts the following four principles: A ban on Ralph Klein-style private, for-profit hospitals; a freeze on the delisting of health services; an end to the proliferation of private, for-profit long-term care and home care and a tougher inspection system and stiffer penalties for independent health facilities."

Further debate.

**Ms Lankin:** Thank you, Mr Speaker. I will have an opportunity when we return to this debate to give further explanation of those principles. But the amendment that has been put forward by the official opposition I suspect—I'm guessing, prescient in the way I am—the government members will vote against.

The amendment I'm putting forward is not an amendment that lays blame in any direction. It is an amendment

that says, as we bring the federal government to the table, there are some things in Ontario we need to do today in order to halt the dismantling of the public nature of medicare and ensure that the reforms that the minister has talked about and that I will talk about in the remainder of my speech, reforms where I think we will find a consensus in terms of the direction that medicare needs to go, have the opportunity to take place.

If more are delisted, if more home care services are privatized before they're brought in under the Canada Health Act, if we don't inspect and toughen up the Independent Health Facilities Act, if we don't return to a process where there is public accountability in that we are providing those services through not-for-profit providers—if we don't do those things, then we will end up, through the back door, having watched the dismantling of public health care just by virtue of the change in location where it takes place and the fact that out in those other sectors we are seeing a growing portion of that being provided by the private for-profit sector.

I will conclude my remarks today. I look forward to the opportunity to return to this. When the minister stands and has an opportunity to speak from her experience as Minister of Health, I hope that the time I spent as Minister of Health and my insights might also provide to this debate a focus to find unanimity about the direction, if in fact there is an agreed intent on preservation of public health care.

**The Acting Speaker:** Further debate?

**Ms Lankin:** No.

**The Acting Speaker:** No? You're adjourning the debate?

**Ms Lankin:** It's 6 o'clock.

**The Acting Speaker:** It being 6 of the clock, this House stands adjourned till 1:30 of the clock tomorrow afternoon.

*The House adjourned at 1757.*

## ERRATUM

No.	Page	Column	Line(s)	Should read:
35	1832	2	56	<b>Mr Hampton:</b> But, Premier, this is Ontario.



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(Hansard)**

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des débats  
(Hansard)**

**Wednesday 5 April 2000**

**Mercredi 5 avril 2000**



Speaker  
Honourable Gary Carr

Président  
L'honorable Gary Carr

Clerk  
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## LEGISLATIVE ASSEMBLY OF ONTARIO

Wednesday 5 April 2000

## ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Mercredi 5 avril 2000

*The House met at 1330.  
Prayers.*

### MEMBERS' STATEMENTS

#### HOMEcoming 2000

**Mr Dave Levac (Brant):** Today I rise in the House to bring to the attention of the members present and the citizens of Ontario that a special event is being held in Brantford, one of the two municipalities in the riding of Brant that I have the honour of serving.

Homecoming 2000 is an opportunity for all former, present and wannabe Brantfordians to come home. The organizing committee has put together a spring- and summer-long millennium celebration that promises to be nothing less than fun, exciting, friendly, and the creator of loving memories. Coming home is grand.

Here are just a few of the participants you can visit while coming home: The St John's College Reunion 2000 is on May 12 to 14; the Glenhyrst Art Gallery Family Fun Day is on June 2 to 4; the Cockshutt Homecoming Festival and Exhibition is June 2 to 4.

The event that has my face looking somewhat different today sees a beard-growing contest to raise money for the food bank. I'm told that I'm looking somewhat unkempt. It's for a good cause, and I beg the indulgence and patience of the House.

**Interjection:** You look like Gilchrist.

**Mr Levac:** Steve, to your credit.

The food bank's Empty Bowls Gala is on June 10.

Finally, on July 1, homecoming weekend, we have—a chance to rid myself of this salt-and-pepper facial hair—our Cockshutt Park Homecoming Day, and on July 2, our gala homecoming parade and picnic.

For more information, call (519)751-9900.

#### CARDIAC CARE

**Mr Steve Gilchrist (Scarborough East):** I rise today to again add my voice of support for the establishment of full cardiac care in the eastern GTA. In its report released March 10, 2000, the Cardiac Care Network of Ontario estimated that cardiac surgery in the eastern GTA can be expected to grow by 36% by the year 2006, a rate which is more than double the estimated population growth of 14% during that period.

The establishment of full cardiac surgery at the Centenary hospital site of the Rouge Valley Health System would allow close to one million residents access to a full range of cardiac services closer to their home.

Our community has worked hard to show support for the establishment of cardiac surgery in our area. Led by the Cardiac Care Community Advisory Group under the volunteer leadership of Mr Phil Diamond, close to 200 volunteers have been supported by 125 schools, 165 churches, 25 service clubs and some 225 local businesses to gather more than 18,000 signatures supporting advanced cardiac services.

The Rouge Valley system is already known for its extensive roster of cardiac services, including a cardiac catheterization lab, rapid evaluation and treatment for heart attacks, stress testing, nuclear function studies, a permanent pacemaker clinic and a full cardiac rehabilitation clinic. Cardiac surgery is the only service not currently being offered at Centenary hospital, and its addition is essential.

I applaud the work of the CCN and I urge the Minister of Health and Long-Term Care to commit to funding cardiac surgery at the Centenary site of the Rouge Valley Health System, so that the residents of Durham region and eastern Toronto finally have full access to all these essential services.

#### COMMUNITY SAFETY

**Mr George Smitherman (Toronto Centre-Rosedale):** Today I am joined in the gallery by a group of people from the riding of Toronto Centre-Rosedale, and in particular the St Lawrence neighbourhood. The St Lawrence neighbourhood and the constituents in my riding deserve adequate protection from crime. Regrettably, this government's motto on so many things is, "Doing more with less," and in the city of Toronto that means we have to cope with fewer police officers. Yes, fewer. There are 90 fewer police officers in the city of Toronto since when this government was elected, and that number is in decline. The municipality of the city of Toronto is dealing with rising debt from downloading, because this government doesn't believe in standing up for the words it speaks too often.

In the last little while, the government has been muted in response to a series of murders in my riding. Where actions speak, this government offers only words, tough talk. With respect to the issue of crime, Mike Harris's government is all loud talk. The Solicitor General and the Minister of Consumer and Commercial Relations, in

response to murders in my riding, had a press conference. Yes, in response to the problem of murder in the constituency of Toronto Centre-Rosedale, this government did nothing to put more police on the streets. Instead, they ordered up another backdrop. They had another press conference. They called one more conference for London this fall.

I challenge the government opposite—the member for Willowdale was on his feet on this subject the other day—to do something to put more police on the streets of Toronto, not fewer.

### ONTARIO ECONOMY

**Mr David Young (Willowdale):** During the winter break I had the opportunity to meet and consult with business leaders from throughout my community of Willowdale. We spoke about the upcoming budget. They told me that we need to continue to cut taxes, balance budgets and spend within our means. We need to continue to cut property taxes, payroll taxes and corporate taxes, and we need to keep on pressuring the federal government to cut their excessively, high EI premiums. They also told me that we need to invest in our infrastructure. We need that investment to ensure that our highways and transportation network can meet the expectations of economic growth. Over \$1 billion in goods and services cross the Canadian border each and every day, most of it here in Ontario. Our infrastructure must be strong if our province is to compete and succeed in the 21st century.

I am proud to say that Willowdale continues to grow. New businesses are coming to our community all the time. You only have to travel up and down Yonge Street to appreciate the pace of this exponential growth. The cranes that exist are testament to how well we are doing. However, we still have much to do. Keeping Ontario prosperous and growing is a 24-hour-a-day, seven-day-a-week, 365-day-a-year job.

### DRIVER EXAMINATIONS

**Mr Bruce Crozier (Essex):** My statement today is to the Minister of Transportation. Yesterday, Minister, you told this Legislature that the waiting time for a G1 licence test was seven weeks and for a G2 test was 12 weeks. The people of the riding of Essex beg to differ. My constituency office called the Windsor test centre this morning and the earliest appointment for a G1 licence is June 27, a 12-week wait. The earliest appointment for a G2 test is February 23, 2001, a wait of 47 weeks.

Minister, you claim to have fixed the problem. What you don't point out is that your government is to blame for the backlog in my riding. It was your government that closed the test centre in Essex county. It was your government that failed to listen when I came to the House to warn you of this problem.

My constituents don't have the option of jumping on the subway to go and get groceries. They don't have a GO train to take them to work in the morning. The

ministry hotline for the closest test date may work in the greater Toronto area, but it's not an option in Essex. People can go to Windsor or Chatham, both with similar wait times. In fact, one person was advised that a test could be obtained more quickly if they went to St Catharines. If your solution is for someone to drive to St Catharines for a test, perhaps you should invest in a road map. You know, they would have to navigate Carnage Alley to get there.

Minister, stop your game of phony questions and hollow announcements and address the problem. The testing centre in the county must be reopened in order to provide service and eliminate the backlog.

**The Speaker (Hon Gary Carr):** If the members would kindly appreciate other members—I know that in some cases they're not even heckling, but there is some talking—to be polite, if we could.

1340

### CHURCH FIRE

**Ms Marilyn Churley (Broadview-Greenwood):** I want to take this opportunity on behalf of the New Democratic Party to express our sympathy to the Greek community of Toronto over the fire which destroyed the Annunciation of the Virgin Mary Greek Orthodox Church two days ago.

I have, on occasion, visited this beautiful church and participated in Easter services in the church with friends from the Greek community from my riding of Broadview-Greenwood, and I'm deeply saddened by the loss of that church.

I want to tell His Eminence Metropolitan Archbishop Sotirios, the president of the Greek community of Metropolitan Toronto, Mr Costas Menegakis, and Father Peter, the cathedral priest, that we are deeply saddened by the loss of the church. Our hearts go out to those who are most directly hurt and affected by the loss of this place of worship. I saw some of the parishioners being interviewed outside the church, and their shock and pain was evident and very moving.

But this I know: that the Greek community is very strong, generous and community-minded. The Greek Orthodox church is extremely important to the religious and cultural life of the Greek Canadians, and I was not at all surprised to see the community rally and come together immediately to start making plans to rebuild the church. I have no doubt that this will happen. The magnificent building which was destroyed cannot of course be replaced, but I know the community will be able to replace it with a new church, which will be the pride of the community one day.

Once again, I would like to relay our sorrow for this incredible loss to the Greek community.

### FLOAT YOUR FANNY DOWN THE GANNY

**Mr Doug Galt (Northumberland):** If you like to have some fun and don't mind getting a little wet, I



suggest you come to Northumberland county this weekend and float your fanny down the Ganny.

I'm sorry if this happens to sound a bit odd, but we're very proud of a festival held each year in the town of Port Hope, called Float Your Fanny Down the Ganny. It's an appropriate name for the event because hundreds of people will be floating their fannies some 10 kilometres down the Ganaraska River. Many will choose conventional methods of aquatic travel, such as canoes and kayaks—and I'll be in a kayak. But others bring their own homemade creations that often sink and attract the most attention, something like a Liberal election campaign.

What is the purpose of this event? It's all meant to mark the anniversary of a devastating flood that struck downtown Port Hope some 20 years ago. Instead of reflecting on the negative aspects of a huge flood, the people of Port Hope have given their remembrance a positive twist. Hundreds of people will be floating their fanny down the Ganny in hopes that they might win a prize for best theme, best costume and even for the most crew members on a craft. If you prefer to stay away from water, there's also lots to do on dry land.

I certainly applaud my constituents and friends in Port Hope for organizing this festival. I hope many of you will take part and make your way to the historic town to take part in this year's festivities.

**Mr Dominic Agostino (Hamilton East):** On a point of order, Mr Speaker: I would like to ask for unanimous consent to allow us to wear the "Save the Henderson" buttons in support of the people who are here from the Henderson hospital.

**The Speaker (Hon Gary Carr):** The member has asked for unanimous consent to wear buttons. Is there unanimous consent? Unfortunately, I heard some noes.

## HEALTH CARE FUNDING

**Mrs Marie Bountrogianni (Hamilton Mountain):** It's an impossible task to express to this House the depth of anger, frustration and concern I share with the many visitors in the gallery from my riding of Hamilton Mountain who have come here because of the imminent threat to the Henderson hospital and the resulting impact of a change in its acute care status and, therefore, on the safety of 200,000 people.

The Hamilton Health Services Corp announced on March 2 that the Henderson's emergency room should close and other services be removed, resulting in the loss of its role as an acute care facility and host hospital for the only cancer centre in the region. This cancer centre was built seven years ago at a cost of \$41 million; it will need to move at a cost of over \$70 million.

This recommendation has been put forward without public consultation, without comparative cost and impact analyses and prior to the publication of the results of the ministry's operational review. Furthermore, it contradicts the 1996 Health Services Restructuring Commission's recommendations. It also contradicts the public statement

made by the Premier in Hamilton on February 10 that the Henderson would retain its active and special focus around cancer care.

I call on the Premier to keep his promise, stop the nonsense around the Henderson and take the necessary action to keep the Henderson acute care facility intact and give the people of Hamilton-Wentworth the health care they deserve.

## LEADER OF THE OPPOSITION

**Mr Bert Johnson (Perth-Middlesex):** Recently the Liberals have become increasingly interested in how our Premier is spending his time; in fact, they have complained about it. The member for Toronto Centre-Rosedale tried to introduce a bill yesterday. Did he do so on his own or did he do it with the permission of his leader?

I find it laughable for the member for Ottawa South—  
*Interjections.*

**The Speaker (Hon Gary Carr):** Would the member take his seat. Stop the clock, please.

All members have an opportunity to make statements. I think it's fair that we get to hear each of the members. Also, I know there's some inadvertent talking that's not heckling going on as well. Could we keep that to a minimum as well. It's tough enough with the yelling that goes on with the heckling without other conversations. If we could just remember and try to be a little bit more polite, it would be helpful.

I'm sorry to interrupt the member. Would you continue.

**Mr Johnson:** I may need a little more time.

The member for Toronto Centre-Rosedale tried to introduce a bill in the House yesterday, and I wonder if he did so with the permission of his caucus and his leader or if he did so on his —

**The Speaker:** Stop the clock, please. A point of order.

**Mr Dwight Duncan (Windsor-St Clair):** Mr Speaker, on a point of order: In the past you have found that references to the Premier's absence ought not to be raised in the House, and the member is continually referring to the absence of the Premier from this House.

**The Speaker:** I thank the member. All members will know that references to attendance on all sides—

*Interjections.*

**The Speaker:** Just a second while I finish here. One of the problems we have is that when this begins—you saw what happened later. When people even go out to the washroom, the yelling and screaming starts, "Where are they?" This takes us down a slippery slope. The standing orders for all members, you should be aware, are very clear. You cannot refer to when a member is here or not here. Quite frankly, some of the games being played are very childish and I wish all members would stop it and get on with the business of the day.

The government House leader has a point of order as well.

**Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader):** Mr

Speaker, this time of the day is the only time when private members have an opportunity to make a statement. On two occasions the present private member has been interrupted by the opposition benches, once in terms of an uproar that interrupted his statement and, second, on another point of order by the Liberal House leader. I would ask you to restore the clock and give this member a full minute and 30 seconds to put his statement forward.

**The Speaker:** The member did not lose any time. When I stood up, I stopped it right away. Having said that, it also interrupts the flow, because people are on a flow, and to start all over again—

*Interjection.*

**The Speaker:** Order. As you know, it is nice to have a flow, as I'm finding out. When you get interrupted, it's very difficult. What I will do in this case is give the member a little bit of lenience. Again, what happens in situations like this, when one side disrupts members' statements, the other side does it back, and then we end up with chaos and we can't hear anything.

Will the member please continue, and I apologize for the interruption.

**Mr Johnson:** I find it laughable for the member for Ottawa South to accuse Premier Mike Harris of not being on the job. The member is one to talk the talk but not walk the walk. When the federal Liberals recently held their policy convention in Ottawa, the Ontario Liberal leader was nowhere to be found, even though it was in his own backyard. With the entire Ontario caucus and the federal cabinet there, he could have used that opportunity to make the case that his province needs more support and investment from the federal government for health care.

In the weeks before the convention, the Premier—

*Interjections.*

**The Speaker:** Order. Would the member take his seat. This is an instance where it's difficult to hear. I couldn't even hear whether you were talking about the member's attendance in this House or at a convention, I thought. In situations like this, first of all—

*Interjections.*

1350

**The Speaker:** Order. We'll just sit and wait then until you're quiet. As I've said before, the only person who's happy when I'm standing here is my mother, who gets to watch me all afternoon if you have to sit here for two or three hours and watch me. I was going to say my kids as well, but hopefully they're in school.

The point of the matter is that I cannot hear whether the member is even out of order because I couldn't understand when he was speaking about attendance in the House. Having said that about the attendance, I would remind the member that you cannot refer to attendance in this House, and if in fact he has referred to it, I would appreciate the member withdrawing that. As I said, I was not able to hear that, but I'm sure the member will heed the recommendation. Continue.

**Mr Johnson:** Both your mother and you will be pleased to learn that I didn't refer to absences at all. I may not have had an opportunity to put it all in the oral part of this, but I'll send each member of a copy of it so that they can have it.

In the weeks before that convention, the Premier and the leader of the third party signed a joint letter calling on the federal Liberals to increase health care spending. What did Mr McGuinty, the Leader of the Opposition, do? He refused to stand up for Ontarians.

**The Speaker:** Order. I was waiting for the member and let him go a little bit longer, but he was well over the 90 seconds. I gave an extra 15, even with the interruptions. I apologize to the member. Again, this is what happens when we begin that process.

## VISITORS

**The Speaker (Hon Gary Carr):** On a different subject, I am pleased to inform the members of the Legislative Assembly that we have three visitors from the city of Hamilton today in the members' west gallery. We have three elected officials: Terry Anderson, an alderman from ward 7; Bill Kelly, an alderman from ward 7 as well; and Tom Jackson, an alderman from ward 6. Please join me in welcoming our guests.

## INTRODUCTION OF BILLS

### HIGHWAY TRAFFIC AMENDMENT ACT (STUDDED TIRES), 2000

#### LOI DE 2000 MODIFIANT LE CODE DE LA ROUTE (PNEUS CLOUTÉS)

Mr Bartolucci moved first reading of the following bill:

Bill 57, An Act to amend the Highway Traffic Act in respect of studded tires / Projet de loi 57, Loi modifiant le Code de la route en ce qui concerne les pneus cloutés.

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry? Carried.

The member for a short statement.

**Mr Rick Bartolucci (Sudbury):** A very short statement. This bill amends the Highway Traffic Act. The use of studded tires will generally be prohibited, with two exceptions. A motor vehicle with studded tires that conform to the prescribed standards and specifications may be operated on a highway in the part of Ontario prescribed by regulations as being northern Ontario. It may also be operated on a highway anywhere in Ontario if the address of the owner of the vehicle is in northern Ontario.

Tests by experts have indicated that studded tires have minimal effect on asphalt, and studies conclude categorically that studded tires save lives. While northerners



continue to experience more dangerous highways than ever before, Ontario remains the only province to ban the use of studded tires. This would change that. We would ask Mike Harris to get a grip.

#### YOUTH NEWS NETWORK-STYLE MARKETING PROHIBITION ACT, 2000

#### LOI DE 2000 INTERDISANT LA PROMOTION FAITE NOTAMMENT PAR LE YOUTH NEWS NETWORK

Mr Marchese moved first reading of the following bill:

Bill 58, An Act to amend the Education Act regarding Youth News Network-style contracts to expose students to advertising and other content / Projet de loi 58, Loi modifiant la Loi sur l'éducation à l'égard des contrats passés notamment avec le Youth News Network visant à exposer des élèves à des publicités et à d'autres types de contenu publicitaire.

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry? Carried.

The member for a short statement.

**Mr Rosario Marchese (Trinity-Spadina):** This bill would ban the Youth News Network and any similar company from classrooms in Ontario that would require the enforced viewing of news and commercial programming. We join with the Ontario Education Alliance and many other parent, community, labour, media and church groups in affirming that education is for learning and not for business.

#### EMPLOYMENT STANDARDS AMENDMENT ACT (RAISING THE MINIMUM WAGE), 2000

#### LOI DE 2000 MODIFIANT LA LOI SUR LES NORMES D'EMPLOI (AUGMENTATION DU SALAIRE MINIMUM)

Mr Hampton moved first reading of the following bill:

Bill 59, An Act to raise the minimum wage to ensure that everyone shares in Ontario's prosperity / Projet de loi 59, Loi augmentant le salaire minimum pour que toute la population puisse bénéficier de la prospérité de l'Ontario.

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry? Carried.

The member for a short statement.

**Mr Howard Hampton (Kenora-Rainy River):** This bill will benefit hundreds of thousands of Ontarians by raising the minimum wage for the first time in over five years. It will increase the minimum wage by 65 cents per hour, up to \$7.50 an hour, a level that is equal to that of Ontario's major trading partner, the United States.

## MOTIONS

### COMMITTEE MEMBERSHIP

**Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader):** I move that the following amendments be made to the membership of certain committees: Ms Mushinski replaces Mr Tascona on the standing committee on justice and social policy; Mr Gilchrist replaces Ms Mushinski on the standing committee on general government; Mr Young is added to the standing committee on finance and economic affairs; and Mr Murdoch replaces Mr Young on the standing committee on regulations and private bills.

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry? Carried.

**Mr Dominic Agostino (Hamilton East):** On a point of order, Mr Speaker: Yesterday, in response to a question that I had for the Chair of Management Board in regard to the dates that he or his staff were made aware as to irregularities at the Ontario Realty Corp, the minister said he did not know the exact dates, and in Hansard he's quoted as saying, "I'll get that for you." Can I ask, through you, if the minister does have that information, if he can now provide that to the House.

**The Speaker:** It might be more appropriate to wait for question period for that, if we could.

**Mr Dwight Duncan (Windsor-St Clair):** On a point of order, Mr Speaker: I believe there's a mistake in the orders and notices today. For some reason, the government doesn't want to discuss the Premier's health care resolution today.

**The Speaker:** It's not a point of order.

1400

## ORAL QUESTIONS

### HEALTH CARE REFORM

**Mr Dalton McGuinty (Leader of the Opposition):** My first question today is for the Minister of Health. Minister, we believe the people of Ontario want real solutions to health care, like the proposal that I put forward to provide Ontarians with 24-7 health care.

Minister, you have been spending a lot of time and a lot of money engaging in a propaganda war and attacks on other levels of government. I have a copy of a pamphlet that you've been issuing to people in Ontario, together with TV ads you've been running nightly at prime time—a very expensive \$6-million advertising campaign.

Your ads reveal, "The Ontario government has a plan to improve health care." That's a direct quote. Duncan Sinclair, your own commissioner for the Health Services Restructuring Commission, criticized the government for not having any vision. Your pamphlet says that you have a plan. We have contacted the number that's available on

this brochure and the one that's advertised on television and have been informed that there is no such plan.

Minister, would you please give up the charade and get down to work and produce a real plan that Ontarians can have some faith in.

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** Let me first of all set the record straight, since there was some inaccurate information once again put on the table. The amount of money that is being spent on the advertising campaign is almost \$3 million. However, as the people in the province know—

*Interjections.*

**The Speaker (Hon Gary Carr):** Order. I can't hear the reply.

**Hon Mrs Witmer:** It's very unfortunate that the opposition is not aware of the tremendous reforms that have been undertaken in this province. In fact, we are the province—

*Interjection.*

**The Speaker:** Would the member for Windsor-St Clair please come to order.

**Hon Mrs Witmer:** It was our government that, after 10 years of neglect by both the Liberal government and the other government in building absolutely no long-term-care beds, has put in place a plan for 20,000 new beds. It is our government that has increased the support for home care services by—

**The Speaker:** I'm sorry, the minister's time is up. Supplementary.

**Mr McGuinty:** Minister, let me tell you what happens when you in fact don't have a plan. The Henderson hospital is the only acute care hospital in Hamilton Mountain, and it serves over 200,000 Ontarians from the Mountain and surrounding municipalities. The Henderson hospital is about to lose its emergency room, and closing this emergency care is going to put lives at risk. Even your own Health Services Restructuring Commission has indicated that it would be a terrible mistake to close this emergency room.

There is a delegation of representatives here, a group of people, residents from the community on Hamilton Mountain. They are waiting anxiously for you to speak to this issue in this Legislature here today. They want your every assurance that their emergency room in their hospital will not close. I now give you the floor, Minister, for you to provide them with that assurance.

**Hon Mrs Witmer:** We are quite aware of what happens when you have no plan. We had a plan for priority primary care reform, and just recently the opposition has also—

*Interjections.*

**The Speaker:** Order. Would the minister take her seat.

People are here to hear the answer. I don't think they're here to hear people shout at the minister when she's trying to answer. I'd appreciate it if all members would give the minister the courtesy of being heard. We've had some people who have travelled a long distance and would like to hear the minister's reply. I

would appreciate it if they could hear the answer and not hear this massive confusion that's going on.

**Hon Mrs Witmer:** I fully understand the concerns of the people who have travelled to Toronto today in support of the Henderson hospital. In fact, I think it's important to recognize that any decisions regarding Henderson hospital have been made by the Hamilton Health Sciences Corp.

I will be meeting today with representatives of the delegation. I am very interested in hearing at first hand their concerns. I also will be receiving the operational review this week and I will be releasing it as well. Then we will move forward from there.

**The Speaker:** Final supplementary.

**Mrs Marie Bountrogianni (Hamilton Mountain):** I'd like to thank you for the meeting, Minister, and it can't come too soon. As we speak, medical units are being prepared for removal, staff are being told they will move to another site, all this while the corporation is saying they're consulting. The corporation is not consulting. Minister, don't tell us in a few weeks that you weren't warned.

They have planned for months to downgrade the Henderson, to close the only emergency room on the Mountain and that would cause the removal of the \$41-million cancer clinic built just seven years ago. The move is estimated to cost an additional \$50 million to \$80 million. Does this make any sense? I have 75,000 signatures that say no. I have medical specialists, ambulance drivers, nurses and people of Hamilton Mountain who have also said no.

Minister, only you and your government can change this. We know the corporation did this, but you have the authority to do the right thing. I ask you: Will you and the Premier do what you have to do so that the hospital restructuring commission's recommendations are followed and the Henderson hospital remains an acute care hospital and the host hospital to the cancer care centre in the region?

**Hon Mrs Witmer:** I am looking forward to the meeting I will have later today with the representatives of the people who have travelled here in support of Henderson hospital. Again I want to emphasize that the recovery plan that has been put forward belongs to the Hamilton Health Sciences Corp.

We will continue to support the health system in the Hamilton community. Each year we are supporting health care in the Hamilton community with more than \$1 billion in funding for health services. That amounts to about \$1,600 for every person in the region. We have been increasing health spending each and every year. It has increased by about \$230 million since 1995.

#### ONTARIO REALTY CORP

**Mr Dalton McGuinty (Leader of the Opposition):** My question is for the Chair of Management Board. Yesterday we raised the issue in this Legislature of three land deals in particular for which you have ultimate



responsibility. Those land deals resulted in the loss of over \$10 million in taxpayer dollars because of your failure to protect their interests. None of these land deals can proceed without your approval. I obtained a copy of the order in council wherein you made the specific recommendation that one of these deals be proceeded with. That one cost Ontario taxpayers \$5 million. There are two other deals each costing Ontario taxpayers \$2.5 million. The problem is, for the past week officials in the Cabinet Office have been either unwilling or unable to locate and release the corresponding cabinet documents signed by you which recommended the sale of these lands.

Minister, maybe you can give us a hand with this. These are public documents. If they exist, will you make them public now? If they don't exist at this point in time, can you please explain why?

**Hon Chris Hodgson (Chair of the Management Board of Cabinet):** If the Leader of the Opposition would be so kind as to send over the OIC that he has, maybe I could comment more intelligently on some of his premises.

I can assure this House that this government is taking action on these questions and that the allegations are being looked into in the proper manner through the proper process. I'll wait to see what he's got.

**Mr McGuinty:** What I'm providing you with now is a copy of the OIC, signed by you, making a recommendation to cabinet to approve the sale of particular land. In that one you recommend the sale of a property for \$5 million, which in truth was valued at \$10 million.

Now I'm talking about two other pieces of property. Each one was sold for \$2.5 million less than the price they would have obtained in the open market, based on flips which were made shortly after their purchase. You would have had to approve those two land sales as well, Minister. We are unable to locate the orders in council, the documents signed by you approving those deals. Those deals can't go ahead without your approval. Minister, where are those documents?

1410

**Hon Mr Hodgson:** I think everyone in this House knows that the Cabinet Office will release any OICs that exist. They are all public documents.

The OIC that he refers to here involves All City Storage, I believe, a property at 145 Eastern Avenue. I think that was discussed in the fall. You will see that Mr J.J. Barnicke's firm actually handled that transaction, and those details were public in the fall. You can ask for the details on your assumptions about the values as well.

I can tell you that this government is taking action. There are important questions being asked. The board of directors of the ORC asked for an audit of past sales that had irregularities. That audit has led to a process where the police are reviewing those files, and you know that it would be inappropriate for me to comment on the specifics.

**Mr McGuinty:** Orders in council are public documents. They should be made available to us. We sent

somebody over to that office on March 27. We were informed that the documents were not available. We phoned them a few times, including as late as April 3, and we were informed, "We will send them as soon as we can explain why the orders in council are not there." They don't understand why the documentation is not available, the documentation that contains your specific recommendation, your specific signature. Those documents are missing. Eighteen minutes were missing from Richard Nixon's tape; two minutes are missing now, two cabinet minutes are missing. Your signature, your documentation is missing.

Minister, it's a very simple question: Where are these documents? You should provide that explanation to the people of Ontario now, and here is your opportunity.

*Interjections.*

**The Speaker (Hon Gary Carr):** Would the member take his seat. Order. I apologize to the member; I didn't hear the end. Was he finished?

Chair of Management Board.

**Hon Mr Hodgson:** As I explained before, and I know he's aware of it because he repeated it, cabinet documents on the OICs are public documents. If they exist, they would be released.

I just want to remind the member that he should know, or he ought to know, that not all land sales require an OIC. Some require an OIC when we change the process at the front of the process, some at the back end. Management Board properties under the NDP didn't require an OIC. We changed that in 1998. MTO properties don't require an OIC.

I'm sure that those are public documents. If they're available, they will be made available.

**Mr Howard Hampton (Kenora-Rainy River):** My question is for the Chair of Management Board. You keep saying that all your shady land deals, all the taxpayer rip-offs at the Ontario Realty Corp, occurred under an old board, an old team that somehow didn't know what it was doing. You portray yourself and the so-called new board and the so-called new team as cleaning up what happened.

This is the annual report of the Ontario Realty Corp for the 1997-98 annual year. What's interesting is that the members of the board then, with the exception of only three people, are the same members of the board now: the same chair, the same vice-chair, the same old team, the same people, the same minister who approved three land deals that gave away Ontario taxpayers' land at prices that were far too low. Minister, you keep telling people that you're the minister who is going to clean it up, that this new team is going to clean it up. It's the same minister, the same old team.

I think what needs to happen is that you and Mr Miele, the president who's presided over this, have to go. In all decency, in all integrity, you have to resign. Will you do that?

**Hon Mr Hodgson:** I think the leader of the third party is aware that this government and this ministry and this board of directors of the ORC are taking action. We want

to get to the bottom of these questions. We're following the proper process and the police have been asked to review these files. We're as anxious as you are to get to the bottom of this.

**Mr Hampton:** Minister, you may try to miss the point. You're the minister that presided over this. Tony Miele, the head of the ORC, presided over this. It's the same board members who presided over this. Are you going to tell the people of Ontario that you, the same people who presided over these land swindles, the same people who recommended it to cabinet, are now somehow magically going to clean it up? You have some responsibility here. Mr Miele has some responsibility here. You need to step aside so that a true police investigation, a true auditor's investigation can question the staff about your role, about Mr Miele's role. Show some integrity. Step aside so the police and auditors can really ask the tough questions.

**Hon Mr Hodgson:** As he knows full well, I don't have the luxury that he has to make allegations or to draw conclusions or to speculate on what is or isn't under review. I have been following the proper process in terms of the advice from the assistant deputy minister of the Attorney General's office not to comment on the specifics. The police are reviewing the files. This is the proper process to get to the bottom of this. This government and this ministry are taking action that is appropriate and recommended.

**Mr Hampton:** Minister, you can't escape that you are responsible. Ten months after Tony Miele became the de facto head of the Ontario Realty Corp and seven months after he formally took over, you're the one who said that your guy hadn't told you about allegations of wrongdoing. Your board members are still there—the same board members who presided over this, the same board members who agreed to these swindles. You can't stay and claim now that you're going to clean up a mess that you were responsible for. A cabinet minister who presides over wrongdoing in his own cabinet ministry can't then turn around and say: "Well, I didn't know anything. I didn't see anything. I wasn't aware of anything." You should have known. These allegations were raised. Mr Miele should have known. You have to step aside. Getting to the bottom of this means that you have to go. Will you show some integrity and do that now?

**Hon Mr Hodgson:** Despite the opposition's attempt to cloud the facts and blame the whistle-blowers, we are following the proper process. The auditor has been called in. There's a forensic audit underway in review of past files where there are irregularities. The police have been called in to review it. We are taking action to get the truth of these matters out.

#### HEALTH CARE FUNDING

**Mr David Christopherson (Hamilton West):** My question is to the Minister of Health. Minister, two days ago I raised with you the fact that with Henderson Hospital and the Hamilton Health Sciences Corp you had

cut \$40 million out of that budget, which just coincidentally happens to be the same amount of money that the corporation has a deficit for in the current fiscal year. Your response to me, and I'm quoting from Hansard, was, "There have been no cuts." Minister, I have since been in touch with officials at the Hamilton Health Science Corp and not only have there been cuts, the total gross amount of the cuts, and gross they are, is \$140 million if you include all the money that's been added—including things that really shouldn't be included like one-time funding, Y2K money and money to pay for the nurses that you fired—you're still left \$35 million in the hole. Minister, in light of that, I call on you today to (1) reinstate the money that you took out of the Hamilton Health Sciences Corp budget and (2) use your authority and announce that the Henderson will remain open.

1420

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** I have already indicated that I am anxious and looking forward to meeting today with those people who are concerned about the plan that has been proposed by the Hamilton Health Sciences Centre. There will be a dialogue later in the day.

As the member full well knows, we have had an operational review ongoing to take a look at the situation at the Hamilton Health Sciences Centre in order to ensure that we can deliver the best services. But I would again remind the member that to support the people in his community, we are presently spending more than \$1 billion per year. We have been increasing funding for health care in that community and we will continue to do everything we can in order to meet the health needs of those individuals.

*Interruption.*

**The Speaker (Hon Gary Carr):** Sorry to interrupt. Before the member begins, I just wanted to remind all of the members of the gallery that we are very pleased to have you here today, but clapping, unfortunately, isn't allowed. But we do appreciate having you here today and I know everyone will adhere to the rules.

The member for Hamilton West.

**Mr Christopherson:** Minister, I'm disappointed you didn't at least acknowledge that your statement on Monday was incorrect. The fact is that you have removed tens of millions of dollars of funding.

I want also to point out to you that when you talk about ensuring that the needs of our community are met in terms of our health care system—and you certainly give the impression to the people who are here from Hamilton today that you care so much about Hamilton and about our health care system and about Henderson in particular—in response to the question from my colleague from Hamilton Mountain, you said that the decisions are being made by the board of the Hamilton Health Sciences Corp. I remind you, Minister, that under your own Bill 23, sections 6.6 and 6.7 of the Public Hospitals Act allow you to override the decisions of local hospital boards.



Minister, on every front—fiscal, health care or authority—you have the opportunity to step in and do the right thing. I call on you again: Use your authority, reinstate the money you cut from our health care system, and order that the Henderson hospital remain open.

**Hon Mrs Witmer:** Let me again preface my remarks by indicating the fact that we have invested more into the Hamilton community for health care than at any other time. In fact, let's take a look at the Hamilton Health Sciences Centre. There was \$46 million in additional funding provided in 1999, and there was \$3.5 million to support the emergency rooms, \$16 million to address the working capital pressures, a base increase of over \$3 million in March—

*Interjection.*

**The Speaker:** Order. Would the minister take her seat. I know it's an emotional issue, but I would appreciate it if the member would let the Minister of Health finish.

Minister of Health.

**Hon Mrs Witmer:** If we take a further look at the \$370 million that is going to be provided to the Hamilton Health Sciences Corp this year, in the past year the hospital has continued to receive millions of dollars from the province, including \$13 million to address the restructuring issue, \$3.5 million for nursing, \$3.1 million for its trauma program, \$3.5 million for its cardiovascular program and, as I pointed out, \$3.5 million for its emergency services.

I think we also need to recognize that as a result of the restructuring initiative, we have brought together several hospitals that today form the Hamilton Health Sciences Centre.

#### ONTARIO REALTY CORP

**Mr Dominic Agostino (Hamilton East):** My question is to the Chair of Management Board. I want to follow up on the question of my leader in regard to the two missing documents. Let's get some facts on the record here. We are talking about two properties, Tomken Road and Brampton Road, both the subject of OPP investigations into the land flipping that has occurred on those properties.

We have also checked the regulations. Those two properties would have had to have cabinet approval with your signature on those properties. We have tried for six days now to get those orders in council. We were told: "We can't find them. We can't explain why they are not there."

Clearly this is starting to smell of a political cover-up. It is related to the fact that it took so long for the OPP to be called in, and now is it a mere coincidence that the two documents that bear your signature, that are part of the public record, cannot be found by the Cabinet Office? Minister, it is either clearly incompetence or cover-up. Can you explain clearly why those two documents are not available and why in six days the Cabinet Office

could not find them or find the reason why they're not there?

**Hon Chris Hodgson (Chair of the Management Board of Cabinet):** First of all, I don't know what is under review by the auditor or the OPP. I don't know how you know what is under what you call investigation. I'm not aware of it and I'm distressed to learn that you know for sure what's under review in, as you say, an OPP investigation. Those are not the facts I have.

OICs from Cabinet Office, as I mentioned to your leader, are public documents that are available, if they exist. As I explained to your leader, some properties require orders in council to be sold and some do not. If they're MTO properties, for example, or if they were Management Board properties under the NDP rules, they didn't. We changed those rules for Management Board in 1998.

**Mr Agostino:** Let me again remind the minister, we have checked the regulations. These two properties would have needed cabinet approval to be sold. Your signature is on these properties in order for this deal to go through cabinet. Minister, you can't explain. It's astonishing. We're sitting here and we have a Chair of Management Board who cannot explain why these two documents that are public information relating to a police investigation, relating to an investigation by the auditors, are not available through the Cabinet Office, where every other document that we need in relation to ORC deals has been available. I don't think it's a coincidence. It took way too long for you to call in the OPP; it took way too long for you to call in the forensic auditors.

One clearly has to raise the spectre here of what is happening at the Cabinet Office and why these two documents are missing. It smells of a cover-up here, Minister. You don't seem to have any better explanation. We can tell you that you have signed those documents. It is part of the regulations that you must have signed those two documents, or the deal would not have gone through cabinet.

Minister, will you release those two documents today? Your failure to do so will clearly continue to raise the spectre of a political cover-up of the goings-on at the Ontario Realty Corp.

**Hon Mr Hodgson:** Cabinet documents, OICs, are public documents. He can ask for that. I've explained before the answer on the OIC process, if it's required under law, on what happens to properties. I think the bottom line here is that this government is acting; we are taking the proper steps to get the answer to any irregularities that may or may not have happened. I'm not at liberty to speculate, like you are. I've been under instructions from the auditor and the assistant Attorney General of criminal law not to comment on the specifics, not to prejudice the review that's taking place. Surely you wouldn't expect me to comment and jeopardize an independent review.

## IMMIGRANT AND REFUGEE POLICY

**Mr Joseph Spina (Brampton Centre):** My question is for the Minister of Community and Social Services. I recently became aware, on the federal government's citizenship and immigration Web page, of something truly obscene. About halfway down that immigrant services page, which is, by the way, an official, fully authorized and approved federal government Web page, there are clear directions on how a new immigrant can apply for welfare. Correct me if I'm wrong, Minister, but isn't it the federal government that sets the sponsored immigration policy but the province that pays for the welfare costs for failed sponsorship arrangements? Minister, are you aware of this advertising that's going on about Ontario's welfare system around the world?

**Hon John R. Baird (Minister of Community and Social Services, minister responsible for francophone affairs):** In response to my colleague the member for Brampton Centre, I would want to preface my remarks by saying that our government and, I believe, the people of Ontario strongly support immigration. It has benefited our society, our community and our economy tremendously, now and in the past.

I too was startled to learn that the Chrétien government believes that WWW stands for "worldwide welfare." I know, the member knows and Ontario taxpayers know that this is wrong, wrong, wrong. By advertising our welfare system around the world to prospective sponsored immigrants, we're not just advertising and promoting but enabling high sponsorship defaults.

1430

As the member from Brampton Centre will know, there are huge costs for regions like Peel, the city of Toronto, my home community of Ottawa-Carleton and the province of Ontario and they have to pay for the sponsorship defaults allowed by the federal government. If the federal government would stop promoting—

**The Speaker (Hon Gary Carr):** Order. I'm afraid the minister's time is up.

**Mr Spina:** When the sponsorship agreement between the sponsor and the immigrant breaks down, the person winds up on the welfare rolls and the provinces end up paying. Please help me understand this: The government has no responsibility in this? Minister, you mentioned the region of Peel. The reality is that I have in my hand a copy of invoices from the region of Peel to the federal Liberal immigration minister Elinor Caplan, who should understand this situation because she was a sitting member and minister in this province before she went federal. That bill is now \$22 million in Peel alone. How much is this costing the entire province and what are you going to do about it?

**Hon Mr Baird:** This is yet another example of a boondoggle being run by the federal Liberals in Ottawa. This is costing the taxpayers of Ontario more than \$125 million a year, and that money could be better spent on health care, social services and educating young people in Ontario. The simple answer to the problem is that Jean

Chrétien and the Liberal government in Ottawa have lax criteria for sponsorship immigration, and indeed they're not enforcing those sponsorship obligations.

We have some advice: (1) They must stop advertising our welfare system around the world. (2) They must stop allowing people on welfare to become sponsors themselves. (3) They must stop allowing people who have been failed sponsors in the past to sponsor again. Finally, the federal Liberal government needs to pay for the cost of their failed policies and take some responsibility and not leave it on the hard-working taxpayers of Ontario.

## OAK RIDGES MORaine

**Mr Mike Colle (Eglinton-Lawrence):** I have a question for the Minister of Municipal Affairs. As you know, I've put a private member's bill forward to protect and preserve the Oak Ridges moraine. This protection is urgently needed because this precious natural resource is being destroyed by uncontrolled development. The moraine is being ravaged by bulldozers, aggregate extraction, road building and clear-cutting of its forest as we speak.

Your own colleague the former Minister of Municipal Affairs, Mr Steven Gilchrist, stated publicly on February 23 in Richmond Hill that everyone should stand up to developers. He claimed that one of the reasons why he was ousted as Minister of Municipal Affairs was because he stood up to the developers on the Oak Ridges moraine. He said that night, "Don't let the developers bully you."

**Mr Steve Gilchrist (Scarborough East):** On a point of order, Mr Speaker.

**The Speaker (Hon Gary Carr):** Order. On the point of order, the member might not have been here when I talked. You need to get very quickly to the point of order or I'll cut you off.

**Mr Gilchrist:** Mr Speaker, the member has made a characterization of a comment I made that is patently untrue. I suggest that he withdraw those comments.

**The Speaker:** It's not a point of order, and the member will continue, please.

**Mr Colle:** I'll withdraw whatever he wants me to withdraw.

Mr Gilchrist said that night: "Don't let the developers bully you. Don't be frightened by the developers. Don't let them cajole you." That's what he said in Richmond Hill.

Minister, why are you going to wine and dine tomorrow night with hundreds of developers at another fundraiser for you and your party when your own former minister said, "Don't hang around with the developers"?

**Hon Tony Clement (Minister of Municipal Affairs and Housing):** I want to assure the honourable member and this House how important this government feels about the proper environmental protections indeed of all areas of the province, not only the Oak Ridges moraine. That is why we want to see the protections in hydrogeology. That's why we want to see the protections of



terrestrial features. That's why all of those and the linkage of the moraine are so important. That's why in the 1991 guidelines, which this government has accepted, there are eight key principles for determining if a proposed development may be allowed. You have to protect significant natural areas. You have to restrict scattered development. You have to encourage or maintain ecological integrity. You have to encourage the protection and management of woodlands. You have to prohibit unacceptable development when it impacts on watercourses and lakes. Those are the kinds of protections this government is already on record for, and I would appreciate the honourable member's help in ensuring that these protections are part of our natural heritage for present and future generations.

**Mr Colle:** I think actions speak louder than words. Tomorrow night, as Richmond Hill council has a special meeting in regard to an amendment to their official plan, where developers want to pave more of the moraine, want to build on the moraine, where are you going to be? You're not going to be at the public meeting. You are going to be with your friends, the developers, at another fundraising. These same developers are contributing to your campaign and to your party.

When are you going to come clean and stop listening to the developers, who are saying, "Build, build, build," and start listening to the ordinary people in King City and in Richmond Hill, who are telling you to do your job and protect the moraine? When are you going to start listening to the people and not the developers like Mr Gilchrist said publicly on February 23? Let him deny that.

**Hon Mr Clement:** I would say three things. In the first place, I hope the honourable member knows that I am not going to comment on anything to do with the Richmond Hill issue, because it is before the board, and I hope he respects that. The second thing I have to say is that if he wants to go through the list of who has given to whom on their side of the House, we'd be happy to do that. So just keep asking me the question, and we'll talk about that.

I think the people of Ontario want to know about the issues, and I refer the honourable member to the provincial policy statement that this government passed. This government passed this policy statement.

There is a policy statement for development. It says the development and site alteration—

#### *Interjections.*

**The Speaker:** The member has asked the question. I would appreciate it if he would let an answer come. We can't have questions asked and then shout at the minister as he is trying to answer. Minister.

**Hon Mr Clement:** The provincial policy statement adopted by this government indicates that development and site alteration will not be permitted in significant wetlands, in significant portions of habitat where there are endangered or threatened species. Site alteration and development can only be done in a way that makes sure that the density is as high as possible, so that we don't

have the urban sprawl the member is concerned about. So we have put it on the record—

**The Speaker:** Order. The minister's time is up.

### PARENTAL RESPONSIBILITY

**Mr John O'Toole (Durham):** My question is to the Attorney General. Rotary Park, in my riding, is home to the Colville Memorial Clock Tower, which was erected in remembrance of three brothers who were killed in action while serving as pilots overseas during the Second World War. Because of its location, Rotary Park has been the target of youth vandalism. Ron Hooper, of the downtown business improvement association, has told me that his organization is taking steps, such as increasing the lighting in the park, in order to decrease the incidence of vandalism.

Minister, I would like you to explain to me what capacity of property crime could be taken with the actions in your legislation.

**Hon Jim Flaherty (Attorney General, minister responsible for native affairs):** The member's concern about safety in his communities in Durham, part of the great region of Durham, is well known, including Rotary Park in Bowmanville. In 1999, after consulting with more than 70 town hall meetings by the Crime Control Commission around the province, we promised, in our Blueprint, to introduce parental responsibility legislation, which was introduced in this House yesterday, that would make parents financially responsible for property damage committed by their children breaking the law. I am proud to say we are keeping this commitment to the people of Ontario.

In Ontario, 47% of all cases heard under the Young Offenders Act relate to youth property crimes. This is equivalent to almost 20,000 cases each year. The majority of these victims are usually stuck with the bill, because the law to date has not provided effective recourse to victims. With our parental responsibility legislation, victims whose property was intentionally destroyed by a minor will be able to recover up to \$6,000 from parents through using the Small Claims Court procedure.

Of course, we recognize that the vast majority of parents do their best to teach their children respect for the law. That is why parents who—

**The Speaker (Hon Gary Carr):** Order. I'm sorry, the Attorney General's time is up.

1440

**Mr O'Toole:** Before I move to my supplementary, I would like to note that we all recognize that the vast majority of young people are excellent examples of good citizens. That being said, the very few need to understand that there are consequences for our actions that require a sense of responsibility, remembering again that the vast majority play a positive role in my riding. Just recently, Gerry Martiniuk and I presented an Ontario Crime Control Commission award to the first Port Perry Venturers, who have assisted the Durham regional police in a number of community activities.

Understanding that victims of youth-related property crime in Ontario can already sue parents for property damage, Minister, can you explain why it is necessary for Ontario to take the steps that you're explaining in your proposed legislation?

**Hon Mr Flaherty:** I thank the member for bringing up the question relating to the efficacy of the law in Ontario. Quite frankly, the law is not used frequently and there's a reason for that. It is not easy to use and it's expensive and cumbersome and would normally involve retaining lawyers. The Small Claims Court procedure, on the other hand, with the onus provisions that are built into the bill, will make it available in an effective way for victims of property crime in Ontario. The victim ought not to bear the responsibility of having to prove items such as an intentional act. It is very difficult to prove and it makes for an ineffective law. In this bill we have provided that the onus will be on the parents to show that the act was not intentional, which is not the law as it is in Ontario today, despite the misleading comments that have been made to the contrary by some.

*Interjections.*

**The Speaker:** Order. If you would just withdraw the "misleading comments," please.

**Hon Mr Flaherty:** I withdraw it.

The other important aspect which I draw to the attention of members is the availability of the use of an order of disposition under the Young Offenders Act. This is again an important tool to assist—

**The Speaker:** The minister's time is also up.

### POLITICAL CONTRIBUTIONS

**Mr Howard Hampton (Kenora-Rainy River):** My question is for the chief government whip. Yesterday, we were shocked to learn that an unnamed financial contributor tried to buy your support. Equally shocking, Ontario and federal election laws do nothing to prevent a rich contributor from such a subversion of democracy. You're a member of this Legislature, and as I see it you have essentially been asked to provide your support for money. In the interest of the principles of democracy, are you prepared to identify the person or persons who tried to subvert democracy? Secondly, would you agree to ask the Premier to change the Ontario Election Finances Act to prevent this abuse of democracy?

**The Speaker (Hon Gary Carr):** The member should know that the chief whip is not able to answer questions. Any of the members of the government who would like to answer the question may do so. Unfortunately, the chief whip—

*Interjections.*

**The Speaker:** Order.

It's very clear: The chief whip cannot answer questions. Would the member like to direct that to anyone else?

**Mr Hampton:** I'd ask to address the question to the Deputy Premier. I think this is a very serious issue. A member of this Legislature—

**The Speaker:** For a quick second. The reason I'm going to allow this is that I know the Deputy Premier, not seeing the question, may not have been here. I think he may have been talking to someone else. For his benefit, I'm going to allow it again, unless he heard it the first time and wants to answer it.

**Mr Hampton:** A member of this Legislature, a member of your government was essentially offered a bribe yesterday. He was told—

*Interjections.*

**The Speaker:** Order. The member should know that questions need to be related to provincial issues. What may happen in a federal leadership campaign does not relate to provincial issues.

*Interjections.*

**The Speaker:** We'll just wait, then.

In question period, it needs to relate to provincial issues. If the member can try to frame it another way, I will give him one more chance, but if not, we will move on. I want to be very clear: If the member doesn't frame it this time, we will move on in the rotation and he'll miss his question.

**Mr Hampton:** Speaker, at least allow me to put the question and then you can rule if it's in order.

As I started to say, this is about a member of the government. This is a minister without portfolio in the government who was essentially told yesterday that he would receive money for a political campaign if he agreed to support candidate X. I think the citizens of Ontario would be shocked to know, and the citizens of Canada would probably be shocked to know, that this is not against the current election finances laws in Ontario. I thought democracy was supposed to be about one person, one vote, not about who has the most money.

Deputy Premier, would you be prepared to support an amendment to Ontario's Election Finances Act which would prohibit what I think is an open bribe, what I think is the most reprehensible behaviour in a democracy? Would you be prepared to support an amendment to ensure that this can't happen in Ontario?

**The Speaker:** Just very quickly, that question is in order and I apologize for the delay in getting that through.

**Hon Ernie L. Eves (Deputy Premier, Minister of Finance):** The subject matter of the question that the leader of the third party is asking, I believe, has nothing to do with the Ontario Legislature. However, if indeed the third party and the opposition party think there should be changes made to the Ontario Election Finances Act, I'd be quite happy to take the matter up with our House leader and perhaps we can pursue the matter.

**Mr Hampton:** With due respect to the Deputy Premier, I think this goes to the essence of democracy. Democracy is supposed to be about one person, one vote, not who has the money to go out there and essentially offer a bribe. Not only that, but I think this is a matter for your government. One of your members, one of your cabinet colleagues, was essentially offered a bribe. He



was told, "If you agree to do such and such, we will provide you with money."

I want to ask you, Deputy Premier, have you conducted any inquiry to find out who tried to bribe a member of your government, who tried to bribe a cabinet minister in your government, who in a very outrageous way tried to subvert the very principles of democracy? Have you done that, and if you haven't done it, when are you going to do it?

**Hon Mr Eves:** No, I have not. You're the one who is suggesting a bribe has been made. I certainly never heard the honourable member say such a thing.

Talking about one person, one vote, it might do your party very well to adopt one person, one vote, which our party has had for many years.

### ONTARIO REALTY CORP

**Mr Dalton McGuinty (Leader of the Opposition):** To the Chairman of Management Board: Minister, a few moments ago you mentioned it was your understanding that it was not necessary in all cases that an order in council be issued in connection with the sale of land.

I have a copy of the guidelines and procedures put forward by the Ontario Realty Corp. We received these about a week ago, so they are new, and they have been in force, as I understand, for quite some time.

Here's what it says with respect to the disposition of real estate. Section (e) is labelled "Order in Council." It says, "The disposition of all real estate assets owned by the government of Ontario require the approval of an order in council prior to the closing of any sale transaction." There are no exceptions. "The disposition of all real estate assets owned by the government of Ontario require the approval of an order in council." That means that you, Minister, must have approved these sales prior to their disposition.

Now unless I'm mistaken—you are aware of some other rule—would you please stand up in this Legislature and admit that you in fact disregarded the interests of Ontario taxpayers and approved two land sales which cost taxpayers \$5 million?

1450

**Hon Chris Hodgson (Chair of the Management Board of Cabinet):** First of all, on the question of whether or not the taxpayers received their best value, we're trying to improve the process. We're taking action to make it so it's better and it gets better value. That's why all our activities have been done in that regard. The statements you talk about are new procedures, new policies, to do that.

In general, the process on an OIC is that the recommendations come up through staff, right up to the deputy minister, and the minister signs and takes that to cabinet. That's in the case of properties owned by the Ontario government under Management Board.

Prior to 1998, when they set up the ORC, Management Board properties didn't require an order in council. I changed that. This House approved it. Now properties

owned by Management Board and the government need to do that. Properties owned by MTO do not. I believe Natural Resources has their own act as well.

The bottom line here is that we are taking action to answer these important questions and concerns. We've called in the auditor. The auditor noticed some irregularities as well and asked the police to review these files. We are trying to get to the bottom of it.

**The Speaker (Hon Gary Carr):** Order. I'm afraid the member's time is up. Supplementary.

**Mr McGuinty:** Minister, this is the way it works. It's really not a complicated matter. The Ontario Realty Corp is responsible for the sale of land, but the realty corporation is accountable to you. No land can be sold without your specific approval. The regulations put forward by the Ontario Realty Corp specifically say that there are no exceptions. It says the disposition of all real estate assets owned by the government of Ontario require the approval of an order in council. That's your recommendation. That is your approval, Minister.

It seems to me again you only have two options here: Either resign or defend the loss of \$10 million to Ontario taxpayers when it comes to land sales, which happened on your watch, clearly with your approval.

**Hon Mr Hodgson:** Again the Leader of the Opposition makes allegations. I'm not aware if they're public or not. I don't know how he knows what's under review. As far as the specifics are concerned, we are taking action. I've been told, as I've told this House numerous times, on the advice of the assistant Deputy Attorney General of criminal law not to comment on the specifics of any transactions.

I can tell you in answer to your question, though, that the Ontario Realty Corp requires an order in council to sell property. MTO does not require an OIC for property disposal, but they have a memorandum of understanding that MTO does the legal processing and the ORC makes the deal, signs the purchase agreement and hands the consummated deal to MTO. But they do not require an order in council and it doesn't come to the level that it does through the Ontario Realty Corp.

### LIBERAL ARTS EDUCATION

**Mr Doug Galt (Northumberland):** My question is directed to the Minister of Training, Colleges and Universities. Minister, some students in my riding have been listening to some of the reports in the media as well as from the opposition that claim that our government is essentially against some of the liberal arts. This claim has concerned both myself and constituents in my riding.

Students with a liberal arts education—as a matter of fact I have two daughters with liberal arts degrees—are valuable not only in our workplace, but also in our society as a whole. Can the minister reassure those who are pursuing a liberal arts education that these reports are in fact untrue?

**Hon Dianne Cunningham (Minister of Training, Colleges and Universities):** I thank the member for

Northumberland for his question. Actually, everyone in this House should know that students are choosing their curriculum. The students not only in your riding but right across Ontario have also been reading these press clippings. We want to reassure those students who are studying in the humanities and in the arts that those programs will in fact be open to them.

I think it's interesting to know that 52% of students occupy humanities and arts programs in Ontario right now. So more than half of the students are in liberal arts and humanities. What does that look like? Forty-seven per cent of the liberal arts programs—humanities programs—in Canada are right here in Ontario, when only 38% of these undergraduate students are in Ontario. What we're really saying is that we're great in Ontario, but we're really great across the country when it gets to providing courses in liberal arts and humanities, and we hope to keep it that way when the students choose to choose those courses, is the answer to the question.

**The Speaker (Hon Gary Carr):** Members, I am watching the clock. Not only am I watching the clock, but the clerks at the table are. I'd appreciate if members wouldn't yell the time. We may make mistakes, but most of the time we are right. It's not only me, or we might be wrong most of the time. The table is watching it, so we will stick to the minute. Supplementary.

**Mr Galt:** Thank you, Minister, for addressing some of those concerns. However, the students and parents in my riding—and in the west gallery are several students from the Trenton High School—need some assurance that the new, performance-based funding will not force institutions to redirect funding from arts and humanities to high-tech programs. The current demand for technology graduates might inflate the institution's graduate employment rate, thereby giving institutions an incentive to fund those programs over the liberal arts.

Minister, can you reassure Ontario students, particularly the ones from Trenton, that this indeed is not the case?

**Hon Mrs Cunningham:** In response to the question, and for those students here this afternoon and across Ontario, the good news, the great news, is that students across all disciplines are getting jobs when they graduate. Ninety-one per cent of university graduates have jobs after six months no matter what they graduate from, and 89% of college students have jobs no matter what they graduate from. The future is great, students are getting jobs and graduates from most programs, of course, are performing very well in the job market. This is proof, as always, that a good education gets you a good job.

Having said that, Mr Speaker, I think that students and their parents want to know what the graduation rates are and what the success rates are in getting jobs. That is why we have performance indicators, so those students can find out today—

*Interjections.*

**The Speaker:** Order. The member's time is up.

New question, the member for Thunder Bay-Atikokan.

## HOME CARE

**Mrs Lyn McLeod (Thunder Bay-Atikokan):** My question is for the Minister of Health. Minister, Lisa Ann Brady is 20 years old. She has Preador-Willi Syndrome and requires 24-hour care to be able to live in the community. The Durham community care access centre says they can only offer Lisa the maximum number of hours that you have set out in regulations. Last month, the Health Services Appeal Board decided to hear Lisa's case, and the hearing begins on Friday morning. But you are so determined, Minister, to prevent to Lisa Brady from getting any additional support that you have hired private lawyers to fight the appeal and, unbelievably, you have already served notice that you will commence court proceedings, that if the appeal board grants Lisa additional support you are going to fight the Brady family in court.

Minister, why is your government trying to influence the appeal board's decision by starting court action before the hearings even begin, and why are you so determined to see Lisa Brady in an institution instead of giving her the support she needs to live in the community?

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** Mr Speaker, as the member knows, our government has made a very strong commitment to do everything we can to ensure that we expand home care opportunities throughout Ontario and that we continue to provide community care services throughout Ontario. As you know, we set up 43 community care access centres in order that people would have one-stop shopping and would have an opportunity to get the answers that obviously were going to be needed to respond to the concerns of citizens. I can assure you—

**The Speaker (Hon Gary Carr):** Sorry, the member's time is up. Supplementary.

**Mrs McLeod:** Minister, I say to you this afternoon that your government and your ministry have done everything possible to prevent Lisa Brady from being given the support her family is seeking from the community care access centre in Durham. You first denied that a case like Lisa's could even go to the appeal board. You lost that line of attack last spring with the Ian Strathern case. So you quietly filed regulations last summer legally limiting the maximum number of hours of personal support the CCAC can provide. You expected the Health Services Appeal Board would be bound by your regulations. Now you're ready to take this family to court to prevent Lisa from getting any extra support that the appeal board might grant.

Minister, speak to the question of Lisa Brady. Don't you think you have been fighting this disabled individual long enough? Will you clearly state your intention this afternoon to withdraw from court proceedings and let the appeal board decide what is fair and right for Lisa Brady?

**Hon Mrs Witmer:** Mr Speaker, as the member knows, when the regulation was introduced, it actually increased the maximum levels for the majority of CCACs



throughout Ontario. Also, the issue to which the member refers is an individual case. It is currently going to the appeal board, and no decision had been made at the present time.

1500

## PETITIONS

### HEALTH CARE FUNDING

**Mrs Marie Bountrogianni (Hamilton Mountain):** It is with great pleasure that I bring a petition. This is only a sample. There are actually 75,000 signatures gathered through my office, through the alderman of Hamilton Mountain as well as the hospital workers at the Henderson.

"To the Legislative Assembly of Ontario:

"Whereas the Henderson hospital is the only acute care hospital located on Hamilton Mountain and serves over 200,000 mountain residents and thousands more from surrounding municipalities; and

"Whereas the recommendations of the hospital restructuring commission clearly call for the Henderson to remain open as an acute care facility; and

"Whereas removal of services from the Henderson hospital would create a situation detrimental to the health and safety of the aforementioned residents of Hamilton Mountain; and

"Whereas there's no conclusive evidence that the removal of services from the Henderson hospital will create long-term net savings for the Hamilton Health Sciences Corp;

"Therefore, be it resolved that we, the undersigned, petition the government of Ontario, through the Minister of Health, to direct the Hamilton Health Sciences Corp to abide by the recommendations of the hospital restructuring commission and take the necessary steps to maintain the Henderson hospital as an acute care facility with the necessary services available to ensure the health, safety and care of Hamilton and area residents."

I proudly put my name and signature on this.

**The Speaker (Hon Gary Carr):** Order. It is very hard to hear the petitions. If the members wish to talk, would they move out of the chamber. That would be helpful.

**Mr David Christopherson (Hamilton West):** In addition to the petitions from my colleague from Hamilton Mountain, I also have the following petition to present:

"To the Legislative Assembly of Ontario:

"Whereas the Harris government has cut \$40 million from the budget of the Hamilton Health Sciences Corp, which has resulted in a health care crisis in Hamilton-Wentworth and left the HHSC with a \$40-million deficit; and

"Whereas the HHSC is now planning to downsize and cut back services at the Henderson hospital by converting the hospital to a daycare hospital with urgent care, rather than an emergency department; and

"Whereas this will have a serious impact on emergency services for the 200,000 residents of Hamilton Mountain, upper Stoney Creek, Glanbrook, Ancaster and other communities above the escarpment; and

"Whereas the mountain population is a rapidly growing community and deserves and needs a full-service hospital; and

"Whereas an ambulatory care centre is not an acceptable replacement for a 24-hour emergency ward; and

"Whereas it does not make sense to spend \$100 million for a new cancer centre rather than half that amount to expand existing facilities at the Henderson; and

"Whereas Mike Harris said in February that the Henderson hospital would remain open for acute and cancer care;

"Therefore, we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That the Legislative Assembly of Ontario direct the Harris government to restore the funding cuts to the Hamilton Health Sciences Corp and develop long-term solutions for the maintenance of appropriate acute care services at the Henderson hospital to serve the needs of the growing population of Hamilton-Wentworth and central south Ontario."

In support of these petitioners, I add my name to theirs.

### DURHAM COLLEGE

**Mr John O'Toole (Durham):** It is my pleasure to present a petition to the Parliament of Ontario on behalf of the Greater Oshawa Chamber of Commerce. They presented me with these documents last night at a dinner where the Minister of Transportation spoke, and they wanted me to pass this on to the Premier as well as the Minister of Colleges and Universities, the Honourable Dianne Cunningham.

"To the Parliament of Ontario:

"Whereas the region of Durham has grown to a population of over 500,000 people; and

"Whereas the time has come to have the infrastructure in a knowledge-based economy;

"The citizens of the region of Durham strongly urge that the Minister of Education and the Minister of Training, Colleges and Universities immediately recognize Durham College and fund it appropriately as a Durham College and University Centre."

I'm very pleased to submit this and also to affix my name to it.

### COUNTY RESTRUCTURING

**Mr John C. Cleary (Stormont-Dundas-Charlottenburgh):** I have a petition to the Legislative Assembly of Ontario.

"Whereas the restructuring recommendations of the appointed commissioner, Harry Kitchen, will be binding for the county of Victoria, we, the undersigned, petition the Legislature of Ontario to halt the forced restructuring

process for many reasons, including but not limited to the following:

"Democratic process has been thwarted in the appointment of the commissioner—87% of the municipalities of Victoria voted against the appointment. Municipalities of Victoria county are already in the process of reducing local government and implementing cost-effective measures to administer services. Their solutions for effective amalgamation have not been addressed by Mr Kitchen's report to the public. Recently instituted market value assessment makes the 1998 information obsolete for the purpose of reliable and accurate cost analysis.

"We, the undersigned, petition the Legislature of Ontario as follows: Please halt the forced restructuring of Victoria county and allow us, the voters, taxpayers, and residents of Victoria county, to work with our elected municipal officials to determine our own future in a fair and democratic manner, at our own level."

That's signed by 848 residents, and I have also signed the petition.

#### ABORTION

**Mr John O'Toole (Durham):** I'm pleased to present a petition from Pat Wilson, Mary McAuley and a number of other constituents in my riding of Durham.

"To the Parliament of Ontario:

"Whereas we have recently learned that our tax money is being used to pay the rent on the Morgentaler abortuary; and

"Whereas by the end of his lease this amount will be in excess of \$5 million;

"Whereas we strongly object to this use of our tax dollars;

"We, the undersigned, petition the Parliament of Ontario to immediately cease these payments."

I am pleased to affix my signature to this petition.

#### MANDATORY INFLUENZA VACCINATION

**Mr Pat Hoy (Chatham-Kent Essex):** I have a rather lengthy petition. I'll read it in part.

"To the Legislative Assembly of Ontario:

"Whereas Karl G. Nicholson, MD, who is a senior lecturer on infectious diseases at Leicester Royal Infirmary in England, states, 'The studies to date haven't convincingly shown that flu immunization reduces the spread of influenza'; and

"Whereas according to Hugh Fundenberg, MD, the world's leading immunogeneticist: 'If an individual has had five consecutive flu shots' in a 10-year period, his study years, 'his/her chances of getting Alzheimer's disease is 10 times higher than if they had one, two or no shots. This is due to the mercury and aluminum in every flu shot. The gradual mercury and aluminum buildup in the brain causes cognitive dysfunction' ...

"Whereas our research has uncovered information that flu vaccinations have many negative implications to health;

"Whereas we have learned that the Ontario Ministry of Health is strongly encouraging facilities to require the mandatory immunization of all employees;

"Therefore be it resolved that we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"Reconsider the encouragement of mandatory influenza shots or any legislation that might require such shots, and that employees be allowed an exemption from such shots, the same as Ontario students are provided through the Form 2 Immunization of School Pupils Act, without exclusion from the workplace."

I affix my signature to this.

1510

#### SENIOR CITIZENS' HOUSING

**Mr Mario Sergio (York West):** I'd like to read another petition which has been delivered to my office. It speaks of the plight of seniors having difficulties with their property taxes. It is addressed to the Legislative Assembly of Ontario.

"Whereas the seniors in Ontario are largely being forgotten by this government, with the vast majority of tax cuts benefiting large corporations and the most wealthy in our society; and

"Whereas due to the government's downloading of responsibility for property taxes to the municipalities, a heavier burden is being placed on seniors living in their own homes; and

"Whereas many seniors, because of their low pension income, are increasingly unable to afford the high cost of upkeep of their homes, prescription drugs and other user fees, and higher property taxes, and are being forced to sell and move into high-priced rental accommodation; and

"Whereas the availability of affordable rental accommodation is becoming a serious problem for seniors since the elimination of rent controls and the provincial government's decision to stop building affordable housing for seniors; and

"Whereas the increasing burden on vulnerable seniors is unfair and unjust to seniors who sacrificed and paid taxes all their lives; and

"Whereas the provincial government has shown little interest in helping seniors remain in their homes in honour and dignity;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"The time has come to remove education levies from the property taxes of low-income seniors."

I concur with the contents of the petition and I will affix my signature to it.

#### ILLEGAL TIMBER CUTTING

**Mrs Lyn McLeod (Thunder Bay-Atikokan):** I have a petition to the Legislative Assembly of Ontario.

"Whereas timber cutters are trespassing on private and crown land, cutting, removing and selling trees, leaving a



financial, environmental, aesthetic and emotional devastation in their wake; and

"Whereas the OPP have no authority to stop a cutter from cutting in the event of a boundary dispute, but may only inform the cutter that a complaint has been lodged; and

"Whereas the mills accept all timber from their contractors whether it is stolen or not; and

"Whereas the practice of the crown attorney's office to delegate these obvious theft issues to civil court places an unreasonable and prohibitive financial burden on the landowner-victim; and

"Whereas the offending cutters are protected by their numbered companies, lease their equipment and declare bankruptcy rather than pay fines and restitution, and immediately register a new numbered company, the landowner-victim must then pay:

"(1) All court costs and legal fees incurred by the offender as well as their own legal fees;

"(2) The cost of the survey;

"(3) The cost of hiring and posting bond for a bailiff, an appraiser, a salesman and bond for each piece of property and for equipment seized from the convicted cutter at the rate of at least \$2,000 for each of the above-listed;

"(4) The cost of cleanup and reforestation; and

"Whereas traditionally settlements to landowners-victims have amounted to the price of stumpage fees for the stripped area, while the cutter profits from the full price of the timber from the mill; and

"Whereas, because the offending cutter must work quickly to avoid detection, he/she leaves the land devastated, with little or no thought to environmental areas of concern, eg, wetlands, reforestation;

"Therefore we, the undersigned citizens of Ontario, petition the Ontario Legislature to acknowledge the unfairness to landowners-victims in the overwhelming support of illegal cutting of private and crown lands.

"We advocate:

"(1) That the cases be tried as grand theft in a criminal court;

"(2) That in the event of a boundary dispute the party who is to benefit financially (ie, the cutter) be responsible for the cost of a survey by a registered surveyor and not a forester;

"(3) Final judgments should not only include fines, all costs incurred for pursuit of justice and stumpage fees, but the full price of the timber, the cost of cleaning up the clear-cut area and the cost of reforestation and maintenance of the cut area, thus making theft of timber from private and crown lands potentially non-profitable;

"(4) Contracts of convicted cutters should be subject to suspension or termination, just as drunk drivers lose licences."

In agreement with this sentiment, I've affixed my signature.

## HIGHWAY SAFETY

**Mr Steve Peters (Elgin-Middlesex-London):**

"Whereas the carnage and the tragedy continues on Highway 401 between London and Windsor; and

"Whereas traffic levels on all sections of Highway 401 continue to increase; and

"Whereas Canada's number one trade and travel route was designed in the 1950s for fewer vehicles and lighter trucks; and

"Whereas road funding is almost completely paid through vehicle permit and driver licensing fees;

"We, the undersigned members of the Canadian Automobile Association and other residents of Ontario, respectfully request the Legislative Assembly of Ontario to immediately upgrade Highway 401 to at least a six-lane highway, with full paved shoulders, rumble strips and centre median barriers."

I respectfully present this petition on their behalf.

## HEALTH CARE

**Mr Mario Sergio (York West):** I have another petition with respect to health care privatization in Ontario which I'd like to read to you. It says no to the privatization of health care.

"To the Legislative Assembly of Ontario:

"Whereas we are concerned about the quality of health care in Ontario; and

"Whereas we do not believe health care should be for sale; and

"Whereas the Mike Harris government is taking steps to allow profit-driven companies to provide health care services in Ontario; and

"Whereas we won't stand for profits over people;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"Do not privatize our health care services."

The petition is quite explicit. I concur with the intent, and I will affix my signature to it.

## CULTURAL ORGANIZATIONS

**Mr James J. Bradley (St Catharines):** I have a petition to the Legislative Assembly of Ontario.

"Whereas cultural organizations make an outstanding contribution to our province by sharing their customs, traditions, language and arts;

"Whereas our cultural organizations are generous in their benevolent contribution to the people of their communities;

"Whereas dramatic and unjustified increases in assessment for our cultural halls have created an extreme hardship for their membership;

"Be it resolved that the provincial government reinstate the previous assessment treatment for such facilities and abandon the assessment change that is so detrimental to our cultural organizations."

I affix my signature, as I am in complete agreement with this, and I'm glad that the provincial Treasurer and Minister of Revenue was able to hear this petition this afternoon.

## ORDERS OF THE DAY

### INTERIM SUPPLY

**Hon Ernie L. Eves (Deputy Premier, Minister of Finance):** In the absence of Mr Sterling, I move that the Minister of Finance be authorized to pay the salaries of the civil servants and other necessary payments pending the voting of supply for the period commencing May 1, 2000, and ending October 31, 2000, such payments to be charged to the proper appropriation following the voting of supply.

**The Deputy Speaker (Mr Bert Johnson):** Mr Eves has moved government notice of motion number 33. The time is split evenly, and that means it will be rotated after each speaker. The Chair recognizes the Minister of Finance.

**Hon Mr Eves:** I am just going to make a few very brief comments. As members are aware, obviously the motion for interim supply provides the government with the authority to make payments to hospitals, boards of education, civil servants, suppliers and others. Payments are currently being made under a motion of interim supply that was introduced on October 21, 1999, and that will expire on April 30 of this year.

I note that my friend the honourable member for St Catharines is sitting in the Legislature. I've heard him comment from time to time over the years that I've had the pleasure of listening to him, which is over 19 years now—my, how time flies when you're having fun—that he wished governments would put these motions earlier on in the session and not leave them until the last few days. Well, here we are, taking the honourable member's advice and moving the motion earlier on.

To ensure that payments scheduled on or shortly after May 1 are indeed made on time and received in all parts of the province, including the north and rural and more remote areas of the province, it's necessary to provide the banking system and the mail system with some lead time. That practice has been given to give them time to ensure that payments are received on time. Payments early in May include, among others, payments for general welfare, transfers to hospitals, boards of education and children's aid societies.

To ensure the province meets its obligations in an orderly fashion, I hope members will be supportive in ensuring that this motion is passed today.

1520

**Mr James J. Bradley (St Catharines):** I want to compliment the Minister of Finance on taking this early initiative. I know he is as disappointed as I that the House sat only 40 days all last year and we were so long in

coming back, because I know he enjoys the exchanges that take place in the House and he loves to be here with his fellow colleagues.

Many people were asking me over the last several months what I was doing in St Catharines. I had to explain that the House hadn't sat since December because the Premier did not want to bring it back. I know that would disappoint the member for Parry Sound-Muskoka as much as I, but I'm glad he's here because I have a few things that are of specific interest to him.

He heard the petition I read. One of the problems we are encountering is a change in the assessment which has adversely impacted various cultural halls. In my own city, those who have contacted me have been Club Roma, the Ukrainian Black Sea Hall, Canadian Polish Society and Club Heidelberg. Halls of this kind are adversely impacted by this, and I find it unfortunate, because we have seen sometimes doubling, sometimes tripling, sometimes quadrupling of the assessment for these halls. I think virtually all of them are appealing those assessments, but I think it's important that the provincial government take action.

We had a meeting the other day with a committee of mostly business people who deal with various classes of assessment, which meets with the regional council. Four members from the Niagara region were there. It was stated by the government members that the initiative could go back to the municipality. I think the people there—I detected a consensus—would like to see the province take that initiative, and I'd be pleased to see that happen.

The second issue I would like to deal with is Brock University and Niagara College and the allocation of SuperBuild funding. Needless to say, the four members from Niagara—again, I think I speak on their behalf, although the government members have to be more cautious in their remarks—were disappointed in the first round of funding. Neither Niagara College nor Brock University received the kind of capital funding we would like to have seen. In other words, their applications were not accepted.

But we do know that a second round of funding is upcoming, and the criteria may be modified or different for that round. I think both those educational institutions have indeed made a compelling case for the kind of funding that we feel is necessary to carry out their responsibilities.

I read in the St Catharines Standard that the Conservative members Tim Hudak of Erie-Lincoln and Bart Maves of Niagara Falls have joined me in writing a letter to the minister about it. I did not phone the newspaper to say I had done so, and I was taken aback when I saw them criticizing their own government, calling for funding for these projects from their own government. But let me assure that this is not as partisan an issue as people think—we have some fun saying that. I'm sure all four of us, including Mr Kormos from Niagara Centre, are determined to see good applications accepted, not just because they were made but because all of us think those



applications have a lot of merit, would assist those institutions in meeting the increased capacity they will need and the new programs that are there.

So I urge the government, in the second round, to give serious and favourable consideration to those applications, and my colleagues from Niagara in this House would know that there is full support from the municipal councils and others in the Niagara region. When the announcement is made, as I suspect it may be, in the near future—I have no inside dope on that, as they say, but when the two Conservative members are writing an open letter, you have to be sure they know that something is coming. Otherwise, they wouldn't write a letter, because it wouldn't look good if the money didn't come.

I am confident that people will understand the merit of the applications and will support them. Both Brock University and Niagara College have been highly successful destination places for many students around the province. They provide outstanding service to the people of Ontario, and I certainly urge the government to move forward with capital funding for them.

I also want to mention that there's a new book out, and particularly those people who live in smaller town areas should know about this. It's called *Merger Mania: The Assault on Local Government*, by Professor Andrew Sancton. I know people in such places as Lincoln, Wainfleet, Fort Erie, Port Colborne and West Lincoln, among others, will be very interested in the arguments put forward by Dr Sancton about the lack of advisability of these mega-mergers. In his heart of hearts, the member for Nepean probably agrees with this. But he is a member of the cabinet, and I don't expect that he is going to break ranks on this.

But, for instance, I urge the editorial board of the *St Catharines Standard*, and all others who are interested in the mania towards mega-cities, to read the book called *Merger Mania: The Assault on Local Government*. He shoots down the arguments in favour of them, and I understand that people have to read other arguments as well. But there seems to be a fad out there that people want to get rid of small communities such as the ones you represent, Mr Speaker, in your part of the province. So *Merger Mania* is the name of the book, Dr Andrew Sancton is the author, and you can get it from Price-Patterson Ltd of Westmount, Quebec.

Now I want to as well mention the issue of health care. I've got a good plan for the government, one that I think you can agree with. You have spent, what, \$3 million now on more advertising? Even Conservatives are phoning me now. Reform Conservatives even are phoning me saying: "Why are they wasting money on these ads? Because the federal government's going to waste money on ads to counter those ads. Why not put the money into health care?" Well, I contend that this government has the money for health care: It's the money they're going to give away in more tax cuts.

So here's my plan for the government, and I want the ministers who are here and others to hear. I think I can sell it to you because it involves bashing the feds. All you have-

*Interjections.*

**Mr Bradley:** See, I've got their attention now. All you have to do is abandon your tax cuts and blame Ottawa. I'll be with you there. I'll say that they had to abandon them because they need the money for health care and they're not just going to give them away in more tax cuts for rich people. What I'm saying is that you have an excuse. You can blame the feds, and isn't that what you like to do?

**Mr Dwight Duncan (Windsor-St Clair):** I blame the feds all the time.

**Mr Bradley:** There you go, blame the feds. Here it is: Forget the tax cuts. People I talk to say: "Take that money you're throwing away on self-serving ads, take the money you're throwing away on those tax cuts for the rich and put it into health care. Invest it in health care and then blame the feds." You can say, "I didn't want to do it, but Ottawa made us do it," and I'll be up in the House applauding you when you do that. I suspect, however, that the extreme right wing which runs this party will say: "No, we must have these tax cuts; they're most important. We'll just keep spending all kinds of money on advertising against the feds and asking questions against the feds."

I gave you an out. I gave you a solution, and a solution that allows you to bash the feds and put money into health care at the same time, and not have to get into more squabbles with them. I don't know if you'll take it. Take it back to the Premier and see what he says at the next caucus meeting. He might well agree with this.

Another issue that came up that I want to touch on briefly was raised in the House today. The member for Oak Ridges is here, so I want to mention it because of circumstances he was involved in, contemplating running for the Canadian Alliance, and the role of money in politics. I think what it did, the circumstances—and I'm not going to get into the details of it, because that's his business and what he wishes to do, but I want to say that I think a plus came out of this. It was exposing the role of money in politics. I want to tell you that the role of money in politics is major, and we do have to go back and look at the amount of money that we allow parties to spend, the amount of money we allow them to raise and take in, and the exemptions, and tighten that up considerably.

I've seen that I have only one minute left, so the last thing I'm going to say to you is that we should be preserving agricultural land; 125,000 acres of agricultural land are disappearing a year. We just had a—

*Applause.*

**Mr Bradley:** I think that applause means it's the end of my speech. I do want to tell you it's important that we address that issue, and as soon as the clock hits 40 I'm going to sit down. There's an Ontario Municipal Board hearing on in Pelham where again there's some agricultural land in question. The question is going to be asked, do we really have to continue to gobble up good agricultural land for development purposes when there's other land available?

Now I will yield the floor to one of my colleagues.

**Mr David Young (Willowdale):** I have the privilege of addressing this chamber this afternoon about the interim supply bill that is before us. It's one of the most important motions that this Legislature sees and I'm certainly hopeful that it will be passed this afternoon. It's the motion that gives the government the authority to continue its programs and to operate its daily business: to send money to municipalities, to send money to hospitals, to pay social assistance benefits for those who require them and to appropriate the payment of the salaries of the dedicated members of the public service.

1530

The motion for interim supply does not specify a dollar amount, as you well know, but does provide spending authority for a specified period of time. This proposed motion will cover the period commencing May 1, 2000, and will run until October 31, 2000.

To continue the job we have been elected to do and to ensure that all scheduled payment obligations are met, this motion for interim supply must be passed. It is extremely important that we move forward with our vision for this province, for a renewed Ontario. This motion will allow us to do so.

Our vision is one of a province that encourages its people to innovate and to create, a province that has a strong social safety net to ensure that those who require assistance, who truly require assistance, will get that assistance so they can get back on their feet.

We have a plan to support that vision. It's a plan to cut taxes. It's a plan to modernize our health care system and to provide it with the financial resources it needs. It's a plan to move more people from welfare to work. It's a plan to improve the quality of education by introducing higher, more rigorous standards and to guarantee that funding will be there to match increasing enrolment. It's a plan we started in 1995, and we are committed to continue that plan.

We have entered a new century, a new millennium, and the new challenges and opportunities that Ontarians will face are exciting and a little daring. Five short years ago, our ability to compete and to meet these new challenges, the challenges of this new era, was questionable. Our province has come a long way over the last five years. It's hard to believe that just five years ago we had an \$11-billion deficit, hard to believe that just five years ago we were among the highest-taxed jurisdictions in North America. We were losing jobs.

A great deal has changed. This spring, it is likely that Ontario will balance its books for the first time in 30 years. Our economy continues to grow.

Mr Speaker, you'll recall that a moment ago I mentioned the fact that five short years ago we were losing jobs. Well, our economy continues to grow, and with the approximately 700,000 net new jobs created since the throne speech in 1995, we've come a long way.

As well, our government has had the courage to cut taxes, both personal taxes and otherwise, 99 times. All

this has fuelled renewed hope, all this has fuelled growth, and in fact it has fuelled prosperity.

What I'd like to do in my time remaining is look for and describe some of the indicators that demonstrate, without exception, that there should be no doubt in anyone's mind that we have achieved remarkable growth.

In the third quarter of 1999, Ontario's real output was up 7.1% compared to the same period a year earlier. That is the fastest gain in 11 years. Real GDP rose by 1.7% in the third quarter of 1999; that's between July and September. If you compare that to the previous year, you see yet another healthy gain. The rise in real GDP, perhaps most importantly, was broadly based, supported by both strong domestic spending and exports. For instance, non-residential investment spending rose 7.9%, residential construction registered a gain of 1.8%, and consumer spending remained robust, rising 1.8%.

There are numerous additional examples of our continued economic growth as a province. Let's look to the fourth quarter of 1999. In the fourth quarter of that year, Ontario gained 46,000 new jobs. In that same period of time, the fourth quarter of the last calendar year, wholesale trade sales advanced 2.9%. Labour income jumped 1.4%.

Private sector economists are optimistic that Ontario's economy will remain strong. The forecast that we have today suggests that we're going to continue to see a 3.7% to 4.2% range of growth. Recently, in fact, forecasters have suggested that even higher numbers will likely be realized. The average private sector forecast for real GDP growth in 2000 is about 4%.

I touched earlier upon the fact that Ontario continues to create jobs. Let me elaborate on that. Employment in Ontario rose by 8,900 in February, following a 21,000-plus advance in the preceding month of January. Since September 1995, Ontario has created in excess of 665,000 net new private sector jobs. This strong growth accounts for close to half of the national private sector job growth.

The unemployment rate was 5.7% in February and the help wanted index rose to 1.1% in February. That's the highest level that we have seen in a considerable period of time.

I'm very proud of this economic growth. I'm especially proud of the growth that is happening in the riding that I have the privilege of representing, Willowdale, and in the greater Toronto area. Since September 1995, the GTA economy has increased and has grown to a point where it has created 336,000—I'll repeat that, 336,000—net new jobs. As of February, the unemployment rate in the GTA stood at an impressive 5.4%, one full percentage point lower than it was in February 1999. I know that's something that all the members of the House will take delight in. This means that in the area immediately surrounding this Legislative Assembly, there are 336,000 individuals who have the dignity of a job, 336,000 families who have benefited by reason of this growth in a very direct and immediate manner.

Over the past year, the GTA's economy created close to 108,000 jobs—that's 108,000; 21,500 in the month of



February alone. That is more people working. That is more people paying taxes. That is more people spending and investing in our economy. All this adds up to more government revenues—revenues we can use, revenues we can invest in priority areas like health care, education and safe communities.

Our young people have also benefited from this growth. The strong economic performance of this province has yielded 37,300 net new jobs. Since May 1997, Ontario's youth have gained 108,000 net new jobs, 46% of the youth jobs created nationally. In 1999, youth gained almost 50,000 jobs—49,100 new jobs. That's the greatest growth in the history of this province for that category.

Let's recall, and it's not an insignificant fact, most importantly, 90% of those new jobs were full-time jobs. Young people once again have reason to be optimistic about their future, to be optimistic about the province.

I hearken back to the days of May 1999 when I was walking along the streets of Willowdale talking to the residents of Willowdale, and I recall very vividly meeting with a group of young men who sat on their front porch on a Saturday morning and assured me they would be voting for me, they would be supporting Mike Harris, and the reason very succinctly was because Mike Harris got them jobs.

I'm proud to say the youth unemployment rate stands at its lowest rate in the past decade, and if the last few months are any indication, it will continue to decline.

Remarkable growth is being experienced in many other sectors as well. Let's talk about a few of them. For instance, Ontario department store sales were up 3.2% over the previous year in January 2000. In 1999, Ontario department store sales jumped 7.5%. As well, retail sales across the province last year gained by 7.8%.

The auto sector is one of the greatest indicators of economic performance and strength in this province, and there is good news to report in this sector as well. Ontarians bought a record 645,472 new cars and trucks. That surpasses the record that was previously set in 1988. More people buying cars means that more people need those cars. That means more people are finding meaningful, well-paying jobs.

1540

The future is only getting brighter. It was reported in the papers today that Toyota is set to invest a significant amount of money to build and expand their Cambridge plant. This will almost certainly result in additional employment for many thousands of people. This is great news for the province, it's great news for the region that Cambridge is situated in and it's good news for the country. This investment will have a tremendous spinoff effect both for the immediate area and beyond.

More Ontarians are working and know about having the dignity of a job, and we are very proud of what this has meant, the tangible results to those individuals. The housing market is perhaps the most telling barometer of economic success and stability. In February 2000, I know you'll be interested to note, urban area housing starts

were up 24.2%, almost 25%, and that is compared to the previous year. In 1999, all area housing starts across this province were at 24.9%; that's almost 25%. In January of this year Ontario home resales were 17.6% above sales in the same month in 1999. As well, the value of residential building permits—a very significant figure that I'm about to give you, significant not only to those who will occupy these homes but to those who will be involved in the construction of these premises—issued in Ontario last year climbed 22.6%, their highest total since 1989.

In 1999 in the Toronto area, new home sales soared 33.1%, hitting a level of 37,304. That's the best since 1986. This means that more and more Ontario families will be realizing their dream of owning a home. They have a renewed confidence in their own future and a renewed confidence in the future of this province.

I've talked, by and large, about what is going on throughout this province. I should make a few comments about what's going on in the riding of Willowdale. During the winter recess, I had the opportunity to meet and consult with business leaders from my community to discuss the upcoming budget. The remarkable success of this provincial economy is due to the hard work and sacrifice of all Ontarians, including the innovation of small and medium-sized business owners. The discussions I had with these business leaders taught me a great deal about what we need to do as a government to ensure that this economic growth continues.

They told me we need to continue to cut taxes. They told me we need to balance budgets and continue to do that. They told me we need to spend within our means.

We need to invest in our infrastructure to ensure that our highways and our transportation system can meet the enormous expectations that exist. We need to continue to invest in priority areas such as education and health care so that we can be sure we have a healthy, well-educated workforce that can compete in this worldwide economy that we now find ourselves in.

They also told me very clearly that we need to continue to cut taxes and we need to continue to cut red tape.

By the way, they also asked me if there was anything I could do about the punishing EI premiums they were forced to pay, that job-killing tax that the federal government continues to impose and increase. I referred them to the federal member and I am hopeful that he will hear their pleas.

All these taxes, particularly the EI tax, I was told are stifling to small businesses.

Tax cuts, I was told very clearly, are an integral part of what is necessary to continue to improve the economy of this province. Our plan includes tax cuts. It includes the elimination of red tape. It includes the elimination of the deficit.

Numerous studies from around the world have found that tax rates are one of the most important factors determining economic growth and productivity. The proof is in the pudding. From the second quarter of 1995 to the third quarter of 1999, both exports and imports have rapidly grown. Tax cuts are fast becoming the competitive edge of this province.

I know that some opposite credit the growth in the US economy, and there's no question that the success of the economy to the south is of some assistance. But the great thing about our economic growth has been that it is primarily driven by what we are doing right here in Ontario. The main source of economic growth, accounting for 80%, has been domestic spending, and that has been very much stimulated by our tax cuts. We are growing more quickly than our neighbouring US states. I'll repeat that again: The growth in this province is much faster than that in the states immediately to the south. In fact, the economy in this province is growing faster than most G7 nations. The opposition takes every opportunity to say that our success is not our own, but unlike them, unlike the Liberals and New Democrats, I have faith in the ability and the capabilities of Ontarians. Our government knows that we cannot depend on anyone else for our prosperity. It is up to us to build a better future for our children.

Willowdale continues to grow. As I mentioned in this Legislature earlier this day, new businesses are settling in my community all the time. You only have to travel up and down the north part of Yonge Street in Toronto to see all the growth. The amount of construction confirms just how well we are doing as a community and just how well we are doing as a province.

However, we still have much to do. As I said earlier today, keeping Ontario prosperous and growing is a 24-hour-a-day, seven-day-a-week, 365-day-a-year job. We cannot, we must not, become complacent with our recent success. I look forward to working with Mr Eves as his parliamentary assistant and with the rest of our caucus to ensure that Ontario continues to be a place that is attractive to investment, a place where people have hope and access to opportunities, a place where our children have access to a top-quality education, a place where everyone has access to top-quality, publicly funded, universally accessible health care, and a place where the people of this province have the dignity of a job.

Mr Speaker, I thank you for allowing me the opportunity of addressing this interim supply motion. I know some of my friends on this side of the floor will have some comments when we have an opportunity to speak again later this afternoon.

**Ms Caroline Di Cocco (Sarnia-Lambton):** I am pleased to speak to the interim supply motion. This debate, as we all know, is tied to the government's fiscal situation. Now we all have heard again the Harris Tory mantra of tax cuts and more tax cuts, yet the fiscal decisions of this government directly affect the sustainable development of this province's people. I want to bring to this discussion the aspect of the devastation to the cultural and heritage community because of continued rounds of cuts. I would just like to know when the cuts stop and when stability and rebuilding begin.

The Ministry of Culture's track record and its effect in recent months on this province's heritage can be described as devastating. The attack on heritage may not get the same media attention as the crisis in health care,

but it's just as devastating to the spirit and the soul of this province. The Liberal caucus and I believe that a strong sense of identity determines who we are as a people, and this identity can only be developed by the legacy we pass on to the next generation. And this can be developed only if we preserve, we protect and we showcase our heritage in this province.

The heritage legacy of the Harris government over the last six months has been one of cuts and For Sale signs. Twenty-seven community museums' operating funds have been cut up to 30%. The rules were changed without notice or explanation. Further, the government notified the museums just before Christmas Eve last year, and these small community museums are now in dire circumstances. Yet they provide an invaluable service in preserving our legacy and passing on our culture and heritage to future generations. One curator said to me, "The Harris government and the Ministry of Culture seem to be bleeding us to death slowly."

#### 1550

What is of concern to me is the Harris Conservatives' simplistically and poorly managed yet arrogant approach to cutting every sector across the board. They do this without proper evaluation or even a thoughtful approach. The zealot approach to tax cuts has undermined and is unravelling our social fabric. You know, \$4.3 billion of tax cuts have been announced, yet Harris is now saying the province doesn't have enough money to sustain health care or to sustain education.

We already know that there's a lack of social conscience, and part of that is a lack of understanding of the economic value that culture and heritage provide. Sustainable economic development's underpinning is diversity, creativity, innovation and thinkers of a well-educated society, but we already know the philosophy of Harris. Premier Harris suggests that workers are what we need in this province, that we don't need any thinkers. I would suggest to him that we want workers who are thinkers.

Recent funding to universities almost marginalizes liberal arts faculties at universities. Within the sectors of the arts, culture and heritage community, I have seen and heard the obstacles and hardships felt by the creators and organizations. The Ontario Arts Council, we know, has been slashed by 40%. Here is another example of cutting for the sake of cutting, because funding to culture and heritage is minuscule in the context of the overall budget. I dare say it's a small investment to the great return that this sector provides. We have 670,000 people working in the arts and culture nationwide. In this sector, \$24 billion goes to the GNP annually, and we've already heard that Ontario has a huge chunk of this.

I want to add to this that Alberta, under Klein, has not cut support for the arts. Not a penny has been reduced to the Alberta Foundation for the Arts, which is a counterpart to the Ontario Arts Council. Even Nova Scotia established a new arts council and is undertaking a new comprehensive cultural sector strategy. And we know that Quebec has increased its funding for culture and the arts.



People like Graham Donald, who is executive director of the Canadian Association of Career Educators and Employers, speak to the lack of interest shown by Premier Mike Harris and his government in funding and promoting arts and cultural education. The Harris government's fiscal agenda is the best indicator of what this government is about and what it's not about. Let's remember his priority: It's all about tax cuts. It's not about better service delivery. It's not about open and honest government, as we are seeing in the sale of Ontario-owned land. We have all watched cutting and creating crises. We've all seen confrontation. We haven't seen repairing, or creating something new.

The Liberal caucus believes that good government takes responsibility and provides leadership. It doesn't point fingers and blame others, as has been the style lately of the Harris government.

By the way, we know that the current market is hot for high-tech jobs. We live in a high-tech world, and this high-tech world needs high-tech people. High-tech companies are finding it increasingly difficult to hire graduates proficient in the field but who are also excellent in writing and oral communication skills.

A recent employer recruitment survey demonstrated that skills valued most highly by employers are those fostered in liberal arts and social sciences. Interpersonal, analytical writing, and oral communication skills are most important across the board. Where do students gain these skills? In liberal arts and humanities. They teach the fundamentals of being cognizant individuals in interpretation, analysis, theorization and argument. However, these skills are in danger because of the lack of interest and money in the arts.

It makes it almost impossible for students to continue in their chosen venues, yet there's a call for them. Groups such as the Cultural Human Resources Council and the Canadian Association of Career Educators and Employers are desperately trying to fill the gap left by government. Arts students are the most underserved part of the student population, yet they are the most versatile. They restore the balance of society with human creativity since it has been tipped so heavily in favour of mechanization. That's not to say that there should be cuts to the high-tech realm either, but at the cost of the arts it is simply a bad idea.

**The Deputy Speaker:** Further debate?

**Ms Shelley Martel (Nickel Belt):** It's a pleasure for me to participate in the debate on supply this afternoon. I want to deal with two areas in particular, those involving cancer care and, second, the Family Responsibility Office. Both of these issues were dealt with by the public accounts committee during the recess and they are issues that I am very concerned about. They are issues, particularly with respect to the Family Responsibility Office, that we see a lot of in our constituency office, and they are issues which I don't feel this government has provided any kind of adequate reply to, despite what went on in public accounts.

Let me deal first with cancer care. This has to do particularly with the discrimination this government is exer-

cising right now as we speak with respect to cancer patients who have to travel away from their home community for cancer care, and the travel, accommodation and costs that northern patients are not allowed to receive when they have to travel to either Sudbury or Thunder Bay for cancer care.

By way of history, when this government was elected in 1995, they made some serious mistakes with respect to cancer care. They cancelled some of the expansion projects for cancer care centres that were targeted for Durham and Oshawa, for example, so that those cancer treatment centres will now come on stream at least two, three or, in one case, four years later than was actually targeted, making it much more difficult for the province to deal with its cancer care waiting list.

**1600**

The government made a second very serious error with respect to the training of radiation therapy students. This training now is all centred at the Michener Institute. Previously it was provided at a number of cancer treatment centres, my own in Sudbury included. In 1997, the government made a very serious error and cancelled all training for radiation therapists in the province for that academic year. So a whole range of students, potentially 60, the number who would have been trained there at that time, lost a whole year of academic training. So we in Ontario find ourselves, in the last number of months—and this has certainly been a media issue in the last number of months—with a shortage of radiation therapists.

We would have had some 60 graduate this year if the Conservative government had not cancelled training in that year; we have none who are graduating in the province this year. And so, of course, there is a massive recruitment internationally now underway to try to deal with our problem. So we have a situation where a number of cancer patients cannot receive radiation therapy in their own communities, or as close to home as possible, because we do not have the specialists there to actually provide the treatment.

Last April the government, in response to the horrible mess they created in cancer, decided they would have a re-referral list and would start to send women who were receiving treatment for breast cancer and males who were receiving treatment for prostate cancer out of their communities to Buffalo, Detroit, Kingston, Thunder Bay and Sudbury, because the cancer care centres in those communities did have enough specialists available and did have the room to provide cancer care. What the government did last April was to say to those cancer patients: "In return for your travelling to these centres for cancer treatment, we will fund 100% of your travel costs, no matter where you have to go. We will fund 100% of your accommodation costs if you have to stay outside of a cancer lodge in any of those communities. We will fund 100% of your food costs and any transportation you might have to pay from the airport to the cancer treatment centre—we'll pay the cab fare as well."

The government began paying those costs, and they have flowed the money through from the Ministry of

Health to Cancer Care Ontario to pay for those costs. When Cancer Care Ontario came before our committee, they made it absolutely clear that this was a special allocation that the Ministry of Health had made to Cancer Care Ontario. It was not funding coming out of the base budget of Cancer Care Ontario; it was a special allocation that had been made by the Ministry of Health specifically to accommodate these cancer patients.

I can't imagine what it must be like to deal with the trauma of cancer treatment. I've never had anyone in my family who has had to go through that. I can't imagine the emotional stress attached to that. But I asked the committee members and Cancer Care Ontario when they were before us in public accounts, and I ask the government members who are here today, to consider what it must be like, over and above the emotional stress of having to be treated for cancer, the financial burden and the financial stress that come when you have to travel out of your community four and five hours away, stay somewhere else for a week for cancer care and pay for those costs. That is what's happening to northern Ontario cancer patients every day as they travel, in northeastern Ontario, to Sudbury for cancer care and as they travel, in northwestern Ontario, to Thunder Bay for cancer care.

Cancer patients in northern Ontario cannot get 100% of their accommodation costs covered. None of their accommodation costs are covered when they go for cancer care. Cancer patients can't get any money covered for food when they have to go for cancer treatment in Sudbury or Thunder Bay. If they do have to travel—and they do, for long distances—they can't afford to fly to Thunder Bay or Sudbury for cancer care, because the most they can get covered of their cost is 30 cents one way from the point of origin to the cancer centre itself. For example, if you live in Fort Frances and have to travel to Thunder Bay for cancer treatment, the most you can get to cover your travel costs is \$102.

I want to raise three specific cases with you. We have the permission of these constituents, and I raised them in the public accounts committee with Cancer Care Ontario and the Ministry of Health, because the deputy was there. Here's the case of Gladys Whelan. She is a senior on a fixed income. Her husband has been deceased for just a little while. Her daughter has to take time off work to drive her from Fort Frances to Thunder Bay for cancer treatment. It's a four-hour drive one way. In the fall, Gladys Whelan drove three times with her daughter. She couldn't stay at the cancer lodge one of those times for her week of treatments because the lodge was full, so she had to stay in a hotel room in Thunder Bay. The whole time she was there, she had to pay the hospital for the meal plan. She had to pay that out of her own pocket, and the gas included. After three trips, she had accumulated costs of over \$1,000 for travel, accommodation and food. The most she got back for each of those trips was \$102.

Gladys Whelan's cancer specialist asked her to come for an additional treatment in December. She refused. She told him no. She said she couldn't afford to go for

cancer treatment any more because not all of her costs are covered, and by the time her costs are covered from the northern health travel grant, it takes up to eight to 12 weeks to actually get any reimbursement. She could not afford to go for another cancer treatment in Ontario in the year 2000.

She's not the only one. Anna Watson is also from Fort Frances. The same situation: Anna had to have someone drive her to Thunder Bay, stay with her in Thunder Bay and drive her back. Again, she had the cost of the hotel, because again she couldn't stay at the lodge because it was full. She had to pay for a hotel room every night, and the cheapest she could find was \$50 per night. She had to pay as well for all the food from the hospital that is attached to the cancer treatment centre. Again, she had to pay for her gas and, again, all she got for her trip was \$102. Her out-of-pocket expenses, by the time she finished, were well over \$800.

The third constituent is a woman by the name of Donna Graham. She lives in Pickle Lake. Mr Speaker, you should know that Pickle Lake is a six-hour drive, one way, to Thunder Bay. She could fly, and she'd probably prefer to do so, because after you have cancer treatment it's pretty hard to get into a car and drive six hours to Pickle Lake. And I can assure you it's not the best paved highway in Ontario—far from it. Donna Graham's return airfare, the cheapest she could ever get, was \$570.31. But because Donna Graham could only get a little over \$200 to cover the cost through the northern health travel grant, she of course had to drive, because again there was no room for her at the inn, so to speak. She and her husband, who drove her a couple of times, and then her son, who drove her a number of other times for her treatment, had to stay in a hotel. Again, they had to pay for their full meal costs at the hospital.

I raise this issue because I asked Cancer Care Ontario very specifically if they did not think this was exceptional. They came to the committee and said that the reason the Ministry of Health was covering 100% of costs for southern Ontario patients to receive cancer care was because we were facing an exceptional situation in the province.

I don't doubt we have an exceptional situation because of the very bad policy decisions that were made by this government with respect to cancer care when they were first elected. But having said that, northern cancer patients face these situations every day. Most people who travel to those treatment centres have to stay overnight and have to pay for their own food. It's a long distance for them to travel. They can't go home at night after their treatment. I asked Cancer Care Ontario if it wasn't exceptional for these people too, what they had to do to get cancer treatment in Ontario in the year 2000.

Cancer Care Ontario hasn't done very much about this, but the Ministry of Health has done absolutely nothing in the face of these very glaring, very obvious discrepancies, this very obvious discrimination against northern Ontario cancer patients. With respect to the ministry's response, the first thing the ministry did—



because one of these constituents, Gladys Whelan, wrote to the Minister of Health and said: "You know, I was at the cancer treatment centre talking to someone from southern Ontario. I found out that 100% of all their costs were covered. Why can't I have my costs covered too?" The minister's signature is on this letter. She wrote back and said that Cancer Care Ontario and the Canadian Cancer Society were paying these costs. How deceitful, how dishonest to tell people from northern Ontario that it's the Canadian Cancer Society paying for 100% of the costs, or Cancer Care Ontario. We discovered at the committee's request that 100% of these costs come directly from the Ministry of Health through a special allocation to Cancer Care Ontario. The Canadian Cancer Society doesn't pay for this at all, so the letter was totally false. Now we see the ministry has revised their letter. Their most recent one still says Cancer Care Ontario is paying these costs but advises people they can apply to the northern health travel grant and get about a quarter of the costs paid for, where other cancer patients from southern Ontario would get 100% of the costs paid for.

1610

The Cancer Care Ontario advisory committee in north-eastern Ontario went to the Ministry of Health's regional office in Sudbury in December and said, "We think we should cover the costs of northern Ontario patients too." They were assured by the Ministry of Health that there would be a proposal ready by Christmas 1999, a proposal that would look at paying 100% of the costs for northern cancer patients to travel for treatment too. Do you know what? As of last Friday the Ministry of Health hasn't developed anything in response to this very serious situation. Clearly the Minister of Health thinks it's OK that we discriminate against cancer patients who live in northeastern or northwestern Ontario. Clearly she thinks it's OK that this government will pay 100% of the costs of accommodation, hotels, meals, receipts to airports, cabs, trains, buses and carfare for people who have to travel for cancer treatment in southern Ontario, but that's not good enough for people in the north.

I think this minister has to absolutely change her position on this. It's a blatant case of discrimination. As I said earlier, I can't imagine the emotional stress that people have to undergo when they're having to deal with cancer treatment. Imagine the added stress that comes when you have a financial burden attached to that treatment as well. In one case, as I said, one of those women actually had to stop her cancer treatment because she couldn't afford to travel any more to Thunder Bay, she couldn't afford the cost to do that. That is wrong, and this Minister of Health ought to do something about that now so that no matter where you live in this province you can be assured of access to cancer services.

The second item that was raised in public accounts over a number of days and one that I feel very strongly about had to do with the Family Responsibility Office. I've got to tell you that cases regarding the FRO are the single-highest number of cases that we continue to receive in our office. This has gone on from the time that

this government shut down the regional offices of the family support plan and laid off 290 staff, 85% of the staff, overnight. It continues to be the area where we have the highest number of cases, the highest number of concerns, the highest number of inquiries and the highest number of walk-in traffic. So nothing has changed at the FRO.

There are two things that I want to focus on. The first, which came to light during the course of the debate at public accounts, has to do with private collection agencies. This minister has gotten up in this House and tried to tell us how wonderful a job the private collection agencies did to find money that was owing to women and children. They did just a wonderful job tracking down money for people who might otherwise not have gotten any money.

The collection agency project was where the ministry handed over all their cases that were older than three years to private collection agencies to track down payers who weren't paying, something that the Family Responsibility Office itself should be doing because government has an obligation to make sure support payments get to women and children. But the government handed it off, which just shows how incompetent they are and how much damage they've done since they destroyed that office in 1997. The government handed over \$450 million worth of arrears to the private collection agencies.

One ministry bureaucrat at Thanksgiving last year said they collected about \$4.5 million, a little under 1% of the amount that was owing. The minister came to this House and tried to tell us, "No, actually it was \$8.7 million." Isn't that a sign of a raving success, \$8.7 million collected out of a total owing of \$450 million. That's a booming success in Conservative terms. It can't be a booming success in anyone else's terms, but I guess according to the minister that was just the highlight of his life, to know that they collected \$8.7 million out of a possible \$450 million. Actually, they didn't even collect a full \$8.7 million, and that came to light during the committee hearings. What we discovered was that about \$7.1 million was what the collection agencies, according to the ministry, actually did collect. The balance of that money, another \$1.6 million, is promised to come in but hasn't yet, and the minister includes that in the amount of money that the collection agencies collected, even though it hasn't come in the door yet.

What's even more interesting is that when the pilot project closed down, as of November 12 last year, the files were returned to staff at the Family Responsibility Office. In fact, of that \$7.1 million that apparently the private collection agencies collected, about \$900,000 actually showed up because of work that FRO staff themselves were doing on those cases. It didn't have anything to do with the private collection agencies any more, because the files had been returned, the collection agencies were gone and the deal was done. As a matter of fact, it wasn't \$8.7 million; it was maybe a little under \$7 million of a potential \$450 million owed. Who can possibly say that's successful?

The worst part is that the government made it clear in the course of the public hearings that they're now going to send even more cases off to the collection agencies, about 20,000 cases from six months of arrears to three years, probably in the same order of magnitude, \$450 million. Again, how successful do you think it's going to be? About as successful as the first round: not very much at all. But the worst part was that it became clear during the course of the hearings that despite the government's rhetoric at the beginning of the pilot project when they said this project would not be funded on the backs of women and kids, in fact it was. We discovered through questioning that as money from payers began to come in and was supposed to go to recipients, 25% of that right off the top went back to pay the collection agencies. One hundred per cent of money legally owed to women and kids ordered by a judge didn't get to women and children as it came in. The collection agencies got 25% of it for every dollar that came through the door. Almost \$800,000 of the money that was collected that should have been going to women and kids went to pay the private collection agencies instead. I think that's disgusting. This is money that is legally owed by court order to women and kids. The government has no business whatsoever giving money owed to women and children to collection agencies. What's worse is that when we asked the deputy who was before us if she could guarantee that that wouldn't happen again with the second round of collection agencies, she couldn't tell us. She couldn't guarantee that. All she could say was that the mechanism of payment for the collection agencies hadn't been worked out yet.

I think it's disgusting that this government would take money that is legitimately legally owed to women and kids and divert a portion of that money to pay private collection agencies. That's why the government shouldn't use private collection agencies. That's why the government should staff the Family Responsibility Office and the way it should be so that its own staff can collect the money that's owing. That's the obligation the government has under this legislation. Then we could be sure that private collection agencies wouldn't be given money off the backs of women and kids, money legally owed to those families.

We're still waiting to see what's going to happen with their second round, but I have no doubt about it that the same thing is going to happen. The government will tender this. The money will go out and some money will start to come back in. On a sliding scale, be it 25%, 35%, 10%—it doesn't matter—some of that money that's supposed to go to women and kids will go right back to the government's friends in the private collection agencies. I think it's wrong. I think women and kids in this province deserve a whole lot more and a whole lot better from this government.

I just want to conclude by saying that the other thing we touched on during the course of the public hearings—and I will find another day to talk about it further—has to

do with the new administration fees that were introduced by this government on April Fool's Day. It is no joke to women and kids and payers who are actually making their payments out there that these new fees have been introduced. The government plans to get about \$1 million annually from new fees that it has introduced for payers and recipients at the Family Responsibility Office. All of that money is going back into general revenue. It's not going back into better enforcement. It's not going back into hiring more staff at the FRO so they could probably do the job and collect the arrears and we don't have to send this stuff to collection agencies. No, it's all going back into general revenue—\$1 million dollars annually.

The ministry in their release tried to say that this is all about going after deadbeat dads, that all of the fees had to do with deadbeat dads. We exposed that at the committee too, because we discovered the following. First of all, the government's going to charge \$10 on every postdated cheque that is used by a payer. Think about that: These are people who are doing what they're supposed to be doing. They're making their payments. But if they choose to use a post-dated cheque, and 8,000 people choose to do that every year, the government's going to charge them \$10 for every post-dated cheque that they send in to pay their ex-spouse and their family. That makes no sense at all.

#### 1620

The government's going to charge every payer and recipient who wants a schedule A, which I have in my hand, \$25. Now, schedule A lists all of the transactions that occur in an account. We normally get requests for them because people have to file them as a payer to prove to Revenue Canada that they've made support payments or recipients have to file them with Revenue Canada to show that they indeed receive support and the amount of it. We get two and three requests for these every week. At the committee we were told that the FRO gets 200 to 300 requests for schedule As every week. The government's now going to charge payers and recipients, people who are doing what they're supposed to, \$25 to get a copy of one of these.

The government, in its release, falsely said, "Well, you can get this information on the automated line." It's completely false. The automated line only gives you the last transaction that has occurred in that account, be it yesterday or a month ago. It does not give you the entire schedule of all the transactions that have occurred. This schedule A is five pages long. The most that you can get off the automated line is the very last transaction that occurred, not the history of the account. The minister's comments in the press release are absolutely false.

The government's going to charge \$100 for each adjustment that it has to make when a payer gives a direct payment to his ex-spouse. You know when we see that happen? At Christmas. We see payers who have a good relationship with their families give their ex-spouse some extra money at Christmas to buy some extra things for the kids. So he makes a payment outside the plan; he gives her a cheque or he sends her some money outside



of the money that's regularly deducted. Now the government is going to charge him \$100, so when the next cheque comes out \$100 will be deducted in terms of the money that goes to the recipient. So, \$100 to make an adjustment when normally we see it because the payer is trying to do the right thing and give his family a little bit more money at Christmas. Where is the sense in this?

The fourth fee is \$150 for a confirmation-of-identity letter. This has nothing to do with anyone who uses the services of the FRO. A confirmation-of-identity letter occurs when the FRO puts a writ of seizure out against someone. We'll say John Doe in my riding—because we had one of these cases—came to see us because he was trying to buy a house and his lawyer discovered that he had a writ of seizure against his name. We had to call the FRO and discovered that no, it isn't actually that John Doe. We had to provide his SIN number, driver's licence, other information, and we got a confirmation letter from the FRO that he could take to his lawyer to say: "This is not me. Please remove the writ of seizure. Please allow the purchase of this house to take place."

Now the government is going to charge \$150 to people to prove that they're not the John Doe who owes money to FRO. These are people who aren't even part of the family responsibility system. They're neither payers nor recipients. Our constituent had nothing to do with the FRO. Now we're going to charge him \$150 so he can prove he's not the one who has the writ of seizure against him. That's stupid.

Finally, there's a \$400 fee for every enforcement action that the FRO takes against payers, people who don't want to pay up. You know what? If you don't want to pay your family support, you quit your job, you hide your assets with your family, you hide your assets with your new partner, you do all kinds of things. So when the government suspends your driver's licence, you just keep on driving. There are any number of mechanisms for people who don't want to pay use in order not to pay. These are the same people who when they get a notice from the FRO saying, "You owe money," toss it in the garbage.

Now the government's going to charge these people \$400 for enforcement action taken on their file. You know what they're going to do with that charge? They're going to throw it in the garbage, just like all of the other notices to pay that they receive from the government. They're going to throw them in the garbage. The government's never going to see this \$400 from anyone, because these are people who refuse to pay support and they're certainly not going to pay a \$400 fee to the government that's trying to get them to pay support. That was the one item that the government has been using to try and say that these new fees are all about getting people to make their payments.

The minister said in this House, "These fees are all about how we force people who aren't making payments to start to pay." Well, you know what? Four of the five fees have nothing to do with people who don't want to pay and the fifth one, the \$400 fee, isn't going to be paid

by anyone anyway because it's the same people who have done everything they can to avoid making payments. They're going to toss the government notice of a bill of \$400 right in the garbage.

This is nothing but a cash grab by the government on the backs of women and kids and payers who are doing what they're supposed to do, which is to make support payments. It's absolutely wrong. It just shows how bankrupt this government is with respect to how it deals with its operations. It clearly shows how destructive the tax cut has been, because this office saw a huge cut when the former Attorney General was there. That's what's led to the dismal situation we have before us. It's just wrong, wrong, wrong for the government to be applying user fees to people who legitimately use the FRO, have a need to use the FRO and are doing what they're supposed to do in terms of paying the FRO the support payments that they are legally supposed to.

**Mr Marcel Beaubien (Lambton-Kent-Middlesex):** It certainly is a pleasure for me to rise in the House today and speak on behalf of the constituents of Lambton-Kent-Middlesex on the interim supply motion. I would like to direct my comments to two issues today, namely, health care and education. There's no doubt I'll be the first one to admit that since the riding of Lambton-Kent-Middlesex is very rural we have had some difficulties with regard to health care services in the past five years; but not only in the past five years—it goes back 10, 15 and as long as 20 years. It is a chronic problem.

There's no doubt we have problems with regard to attracting medical practitioners, but in some communities the serious problem is more with maintaining the people we attract to the communities. However, let me assure you that in the past five years we have made some inroads with regard to resolving the problem. First of all, I would like to point out, to name but three communities, that the Newbury hospital, the community of Grand Bend and the community of Wallaceburg were blessed with obtaining nurse practitioners in the past month. Furthermore, in my riding we received another four and a half nurse practitioners, for which we are very grateful.

Is it going to solve all our problems? No, it's not, but it certainly will go a long way towards helping. Furthermore, the Lambton hospitals recently received \$47 million in capital funding with regard to rebuilding the new St Joseph's Sarnia General Hospital site. The Chatham Kent Health Alliance also received \$39.8 million with regard to the new site in Chatham. Furthermore, the Sydenham campus in Wallaceburg received \$1.39 million with regard to upgrading and improving their emergency intensive care units in the community of Wallaceburg.

The issue I would like to spend a fair amount of time on is dealing with small rural schools. I will start with the premise that there's no doubt that the Lambton Kent District School Board—and I will address my comments to them—had a major difficulty, because after the new funding formula came into being the board was faced with having 7,368 redundant pupil places. It's a major

problem when you find that represents over 25% of all the pupil places within the school system.

I've heard the board say that there wasn't enough money to fund the school system, and I've heard the opposition talk about that for quite a period of time. However, it is a fact, and it has been acknowledged by the board, that during the year 1998-99 the board, when we're talking about student-focused funding, received \$6,030 per year per student. For this coming school year, 1999-2000, the board is receiving \$6,130 per student. That is a difference, an additional funding, of \$106 per student.

I would like to point out that in my riding six elementary schools along with one secondary school have been slated to be closed for this coming September. However, the question that I ask and many of the parents in the riding ask is, why is it that last year, when you had \$106 per student less in funding, you were able as a board to maintain all the schools within the system open? I think it's a reasonable question to ask.

1630

I attended a meeting where there were 1,000 concerned parents. They made 22 recommendations, 22 suggestions, with regard to the closing of schools. There is no doubt that yours truly, along with some of the parents, realized that some of the schools had to close. However, we are questioning the process that was used. The board tells us that 80% to 85% of their budget is consumed by salaries, wages and benefits. If we're going to close a small rural school, that means we're going to play with about 15% to 20% of the actual cost. I'm sure that if a young student uses the washroom, he or she will be using paper towels. So whether we move that student from a small rural school into a larger setting, that cost will be there. I don't know what the cost for supplies will be, but basically we're looking at a maximum saving of 20%.

However, we have to offset that with some of the additional transportation costs to take the displaced students and move them 20 or 30 kilometres away. So what are we really saving? Parents are asking that question: What is the board really saving when they close a small school? Is it because of a lack of dollars? I don't think so.

I would like to point out to you that prior to the amalgamation of the Lambton Kent school board, 63% of the redundant pupil places came from the county of Kent. Yet, of the seven schools that were closed, one was closed in the county of Kent, and that school happened to be in the portion of Kent that I represent.

I'll give you some examples, and these are board figures. This is the Lambton Kent District School Board. With regard to Alexander Mackenzie—and I don't like using it, because I like to fair, I don't like using this school, because this is a somewhat special school. This school is located in the city of Sarnia. It is 50.2% full. East Lambton, the high school that was closed in my riding, is 81.12% full. The Lambton Kent Composite School is 73.2% full. If we go to Ridgeway, the Ridgeway District High School is 60.38% full. We have another school in Sarnia, St Clair Secondary School,

that's 72.39% full. At the other end of the riding, Tilbury District High School is 55.76% full. Yet the board saw fit to close a school that was almost 82% full. Where is the rationale on this school closure?

No wonder parents are alarmed and frustrated. Some of the parents at W.T. Laing in Wallaceburg and East Lambton Secondary School in Watford are taking legal action against the board. Is it because there's a lack of funding? No.

*Interjection.*

**Mr Beaubien:** No, it's not. You discuss it with a lawyer.

The reason they are taking legal action is because there was not a fair process in place. Three years ago, prior to the whole process, schools were closed in the riding. The school board saw fit to put some of the stakeholders—namely, some of the parents—on the committee with regard to closing schools. In the last round of school closures, we went away from that. All we had were trustees and board representatives. No wonder the process is flawed. Like I said in my opening comments, many parents realize that some of the schools have to close, because we do have a decreasing enrolment: The board has lost over 2,000 students in the past three years, and is slated to lose another 710 students this coming year. Without the stakeholders at the table, no wonder the process is flawed.

But more interesting in this entire exercise is that the board saved \$1.7 million by closing the seven schools—\$1.7 million—but the board is going to spend \$1.4 million in capital costs with regard to accommodating the displaced students. Now, it really makes sense to you on the other side of the House, and you really support that. It really makes an awful lot of sense, doesn't it?

Furthermore, I also mentioned that we had 7,368 redundant pupil places. The net reduction in pupil places, in going through this entire process, is that at the elementary level we're going to save 1,049 pupil places and at the secondary level we're going to save 339 places. Does that make sense? That means we have another 5,900 redundant pupil places that we have to accommodate. My question to the board is, how many schools are you going to have left open by the time you get done?

You'll remember I mentioned that the board said there was not enough money. Well, two years ago I heard throughout the Bill 160 debate that there was no money for supplies and books in the schools, but the school board at the end of the school year saw fit to give the principal and the vice-principal a bonus. If there was not enough money in the system to provide books, why is it that at the end of the year there's enough money to provide a bonus to the principal and the vice-principal? The year before that we heard the same story, except that the vice-principals and principals did not get a bonus that time. Who got a bonus? The superintendent received a bonus again.

**Mr David Caplan (Don Valley East):** Like the Premier's staff.



**Mr Beaubien:** I'm glad to hear you acknowledge that.

In the presentations today I heard about cuts and things, but let me assure the people who are listening today that in 1995-96 the expenditures in this province were \$54,638,000,000. This past year, the expenditures were \$56,147,000,000. This is from the 1999 Ontario budget. I know you people have difficulty taking figures from the Ontario budget, but if we're not going to take them from there, I would ask you, where do you want pull them from? Any suggestions? Probably not.

In closing, as I'm running out of time, we keep hearing that there's not enough money in the system. I think, as I've pointed out, there is probably enough money in the system. If you can keep all the schools open with \$106 less per student, why is it that one year later, with fewer students in the system, you have to close seven schools?

**Mr John Gerretsen (Kingston and the Islands):** Let me first of all say how pleased I am to be back here. After all, we should have been back at least about two months earlier so that we could hold the government accountable and look at some of the issues that have just been uncovered in the last couple of days, dealing with some of these real estate deals they've been involved in, in which in effect \$10 million has been lost that could have gone to the health care system.

I listened with great interest to the last speaker. The politics of blame with this government is really on, isn't it? He's out there blaming the school boards. The government was blaming the federal government in its health care resolution yesterday. It's, "Just blame the other guy, because we are right." That has been their attitude for the last five and a half years and undoubtedly will continue for the next three years. I say that the people of Ontario are getting sick and tired of these blame-the-other-guy politics. They don't care, quite frankly, where the money comes from for our health care system, whether it comes from the federal government or from the provincial government. What they do care about is a quality health care system that they can depend on. Ontarians are rapidly losing their confidence in our system, and that, in my opinion, is what is feeding this whole privatization mode that we hear about in Alberta. Yes, I can well understand how some people don't want to wait in line if their loved ones or they themselves are affected with a disease that needs immediate attention. They don't want to wait for three months or six months for an operation. There would be an inclination on behalf of all of us to say, "Yes, let me get that treatment quickly, as quickly as possible."

1640

But that's not the way. The only way that we can effectively fight that kind of attitude and the privatization mode that some people seem to be in in this country when it comes to health care is to make sure that the publicly funded and accessible health care system is of the highest quality that it can possibly be. That's why, for example, our idea, Dalton McGuinty's idea, of making sure that there is 24-hour service seven days a week

available for each and every one in Ontario is the goal that we should be striving towards.

The only way we're going to do that is not by one level of government putting the blame on the other level of government, but by working at it collectively. We've already said in our resolution that more federal funding is required, but we also need more provincial funding. It's going to take a joint working together of the health ministries of the provinces and the federal government to come up with the ultimate model of health care and, really, well-being. We shouldn't always be talking about health care in the sense of dealing with disease or dealing with a particular illness; we should be talking about well-being.

I found it very interesting when I was watching something on television just recently. In this particular program they talked about how in Japan the vast majority of money that's being expended in the public health care system deals with the overall well-being of the individual and deals with prevention, rather than as in our system, in which the amount of money that we're spending on prevention is almost negligible. We're almost not spending any money at all in the prevention of illness. That's what we should be working towards. That's what the people of Ontario demand. That's what survey after survey has indicated: Health care is the number one issue.

We live in a country and a province that is great. But as there is a continual erosion of our publicly funded health care system, we are going to lose the quality of life which is held very dearly by all of us here in Ontario.

I want to talk very briefly about our situation in Kingston with respect to the health care system. We are very proud of our system there. We've got a medical health sciences complex that is anchored by the Kingston General Hospital, St Mary's of the Lake Hospital, the Hotel Dieu Hospital and Queen's University medical school, that indeed is the envy of an awful lot of people. It's the smallest one in Ontario, and it's one that we're extremely proud of. But during the term of this government, the amount of money—the amount of resources that have been allocated to that particular complex and centre, the medical care facilities in the Kingston area—has been reduced on an annual basis from \$250 million by \$25 million annually, to \$225 million.

We've already heard that the largest percentage of money that's being used in the health care system is for people services, whether we're talking about doctors, nurses, nurse practitioners, health care professionals—that's where most of the money is expended. When you take \$25 million out of that system, you are talking about jobs that have been lost, which means that there are fewer nurses in hospitals, fewer doctors, waiting lists are longer and people can't find a doctor when they need one.

There has been a very ambitious program that the health care restructuring commission came up with under the leadership of Duncan Sinclair. Let me say that I've got the highest regard for Mr Sinclair. He's a former neighbour of mine, very highly regarded, from Queen's

University. But he was right in one thing, and that is, he said, "Before you start closing any hospitals in this province, make sure the community care programs and facilities are out there for people." He openly admits that isn't what this government did. They are just starting to close hospitals all over the province, and, in effect, the community care programs aren't available for people. That is a sad commentary.

As you know, the Hotel Dieu Hospital was recommended to be closed by the health care restructuring commission. Some 70,000 people signed a petition requesting that it remain open. Over the last two years this has been a situation in our community which has virtually divided the community. Many people cannot understand why a facility that has provided good medical services for 150 years is scheduled to be closed. Many people cannot understand why there are two floors in this hospital that were built in the last major reconstruction stage, probably about 10 or 15 years ago, that have never been opened. Two floors were built in this hospital that have never been utilized. There are floors that are sitting empty in the Kingston General Hospital. So the health care restructuring commission came up with this notion to close two hospitals and put them on another site at a cost of \$90 million. That has since been upgraded to about \$150 million, of which about 30% would have to come from the local community, which probably means the local taxpayer. Undoubtedly representations will be made to the individual councils, hoping that a lot of the 30% will be raised from the local property tax base.

**Mr Caplan:** Even the Provincial Auditor said so.

**Mr Gerretsen:** Even the Provincial Auditor, in his auditing report, said that the government has grossly underestimated the restructuring dollars required to build these hospitals.

What has happened? It has divided the community. What happened a month or so ago? The Premier comes to town to a Tory fundraiser and says, "I guess the hospital can stay open." I'm glad that the hospital is staying open, and I'm glad that the sisters are still going to run the hospital, until the new facility, he said, was built, but why did the people of Kingston have to go through the traumatic events that they've gone through over the last year?

You may recall we have some islands that were supplied with ferry services, and they went through exactly the same kind of dilemma. Their services were going to be cut off and then all of a sudden the minister said, "I guess we're not going to cut you off."

That is not the way you govern the people of Ontario, whether they're in Kingston, whether they're in Sudbury, whether they're in Toronto or anywhere else. You do not threaten people, in effect, and then say, "Well, maybe we didn't mean it after all." All you're doing by that is causing division within communities, you're causing strife and you're not building the kind of Ontario that each and every one of us want for ourselves, our families and our children.

**The Acting Speaker (Mr Tony Martin):** Further debate?

**Mr Jerry J. Ouellette (Oshawa):** I look forward to the opportunity to debate this very important issue.

First of all, I should clear up a little bit of a concern that was brought forward by a member opposite when the official opposition discussed how the funding in the heritage ministry was extremely lax—the heritage challenge fund. The province is putting up \$10 million, matching funds between the private sector and the municipalities, for a \$20-million total expenditure in heritage. Some within the heritage sector are saying it's the best thing that has happened in heritage in 10 years. I would be remiss in not mentioning that fact.

As well, a member from the third party spoke about the cancer centre in Oshawa and what was happening, or lack thereof. I recall very clearly saying in 1996, when dealing with the health care issue when Cancer Care Ontario was making decisions, that Oshawa would be proceeding in the year 2001. I happened to say it in 1996 and—guess what?—the groundbreaking ceremonies took place and we should have everything up and running in 2001, just as I said in 1996.

**1650**

Not only that, but good things are happening in health care. We've got the Pinewood redevelopment in Oshawa, which is a significant redevelopment supported by many corporations such as General Motors—a very significant part of our community, and we're very appreciative to have them there—as well as the new emergency room funding taking place in Oshawa. As well, I think I'd be remiss in not mentioning that Oshawa last year happened to be the 1999 Communities in Bloom winner for its population class; it's a very significant event in Oshawa, and I know the community worked very hard at that.

As well, last night, I know the member from Durham was able to attend the greater Oshawa chamber dinner. He was there, and I thank the Minister of Transportation for attending. I know the chamber plays a very key role. In fact, I remember that a little over a month ago the chamber had all its affiliates from the region there—the boards of trade for Ajax-Pickering and Clarington—and all the members from Durham were in the same room. One of the key questions there was, when is this government going to push forward the amalgamation? We looked at each other, and I quickly responded. I said, "Well, as I'm sure you're well aware, amalgamation within the community is as easy as bringing all the boards of trade and chambers of commerce together." They didn't know what to say then, when they had so many boards of trade and so many chambers of commerce in the same region that they're asking for changes in government to. Their position very clearly was that more than one and less than eight is what the people pushed for.

As well, I have to congratulate the new president of the chamber, John Williams. I know he's a little busy at this time, being an accountant; coming up close to the end of April, it's a very busy time for that sector of our



community. He works very hard, as did Don Conaby. I must congratulate Don for his good work within the chamber in the past year as the president—actually for two years.

As well, I would be remiss in not mentioning the great happenings at Durham College. I was on the board of governors and am a graduate of Durham College, and I know that the \$28.75 million for the new IT centre has been greatly received and that the people at the college and the community are very thankful for new development such as this happening in Oshawa.

The new developments that we're talking about—in Oshawa, things are happening. We've got new buildings taking place, new construction; we have new peaks in building permits taking place. Things are happening in Oshawa, and not just on the line. When I refer to the line, I know the people in Oshawa know I'm speaking about General Motors. That has always been a mainstay in Oshawa, and with the Silverado winning awards as being a significant vehicle in the automotive industry, Oshawa is doing very well.

As a parliamentary assistant for northern development and mines, Speaker, we get opportunities to see many different aspects of the province. I've been in your riding on a number of occasions, and I'm very appreciative to get the opportunity to be there. Recently, we had a number of events, and one of them that took place was in Hearst. It was Challenge Canada, a snowmobiling race of 2,500 kilometres that started just north of Montreal. People in southern Ontario and my own riding don't really realize a lot of the significant impact that takes place in the north, how snowmobiling, for instance, was such a significant driver of the economy in the north. In Hearst, I spoke with the accountants in the chamber, about the fact that the snowmobiling time of the year was the busiest time for the hotel industry.

Another fact—I'm not sure whether you're aware of it, Speaker, but I would certainly hope so—is that the snowmobiling industry receives about 2,000 sleds annually from the Soo. I think it's the Algoma Central that takes them up to Hearst. On weekend trips, every weekend, they load up about 10 cars with machines and take them to Hearst, where they're unloaded. The hotel industry benefits, the restaurant industry benefits, and they use all the trails up there. It's a rather significant industry, and I was happy that the province was able not only to support it, but to give me the opportunity to find out that much more about that industry.

In Hearst as well, as I'm sure you know, Mr Speaker, they have some new developments. They have the new co-generation plant. Once upon a time they used to pay \$10 a tonne, I think it was, to take bark to the dumps, to the landfill sites, and now they're using that bark in a co-generation plant where they're burning it off with natural gas. It has been extremely successful and very beneficial to the community. I think new innovations like that in northern Ontario are leading the way.

For example, there's a new mill in Goganda, where the fibre industry is very well known. The rattail of a log,

considered to be the top end or the small end of a log—Goganda, for example, is using three inch at the stump, which essentially means that a stump three inches in diameter, which was normally left in the bush, is now being utilized for producing specific fibre, which is one by twos and that sort of thing. So we're seeing some significant changes in the way the forestry industry is acting, and I think the people of Ontario are very supportive of that.

I had the privilege of being in Fort Severn. For those who don't know, Fort Severn is where essentially Manitoba, Hudson's Bay and Ontario come together. While we were in Port Severn, I found some very interesting aspects there. I think people would be interested to know that the standard bag of milk in Fort Severn was \$15. They're very appreciative of having some form of subsidy in order to keep it down to \$15 a bag. Not only that, but gas was \$1.99 a litre.

A lot of my constituents say, "My God, why would you want to live in Fort Severn, then?" Well, you have to be there to understand it. I know that at 10:30 at night, after meeting with the council and the chief, heading back to the room I looked out and I saw the wabaque, or aurora borealis, as it's better known, and certainly appreciated some of the aspects of life in the north. I thank the Premier for giving me the opportunity to see some of the specific areas that one never gets to experience in southern Ontario. I do have a little bit of an advantage. I've owned a prospector's licence, and I had a cutter-skidder operation, as well as a number of relatives in the Soo and Hearst. My father was the chief of police in Thunder Bay. So you certainly get some exposure, but not quite to the extent of a lot of northerners.

With that, I know there's another speaker who is looking forward to spending the time. I thank you for the opportunity to debate today.

**Mr Steve Peters (Elgin-Middlesex-London):** It's indeed a pleasure to be back in the House, as we've missed so much time. But I had an opportunity to tour the province and I really enjoyed that, touring 15 cities and talking to persons with disabilities and the barriers that are in place across this province and the barriers that this very government is putting in place.

The first challenge I want to issue to the 102 other members in this House is: Is your constituency office accessible? If it's not, shame, and I'd say that to any member. It should be accessible, and the government should be investing the money to make those constituency offices accessible.

One of the other issues that I heard as I spoke with persons with disabilities is the fact that they've not seen any increase in their disabilities pension for a very, very long time, actually a period of time going back to 1992 and the social contract. I want to quote from a Hansard of 1992:

"I hope that 1993 is a much better year, particularly for the most vulnerable in our society. Many have lost hope, and I say to them that there is hope....

"The most vulnerable in our society found out today for the first time in the 11½ years since I've been elected that they'll get zero per cent next year. That really is a disgrace."

That was from the Premier. It's still a disgrace that these persons with disabilities, even though you've imposed user fees on them—we've seen utility fees rise, fuel prices rise. You're not doing anything to axe the fuel prices. Persons with disabilities need some respect in this province, and respect is not something they're getting from this government.

I think we need to listen to what persons with disabilities are saying. This is a letter that has just recently gone to the Minister of Community and Social Services.

"We've seen agencies having to cut back year after year because their base funding does not keep up with the cost of living. We have seen these cuts directly reduce the number of staff who are employed to do the work with our sons and daughters even as these programs take on more clients. We also see programs where the number of clients does not increase but the overall needs of the clients have become considerably greater, thus putting increased strain on staffing complements, which must still find ways to get the work done.

"We see cuts to recreation and leisure programs. We see homes and day programs doing without much-needed repairs and maintenance. We see furnishings in need of replacement. We see older vehicles used to transport clients to go to medical appointments and to get into our communities. We see staff who have not had raises in their salaries for 10 years. We see organizations like Ontario agencies supporting individuals with special needs saying there's a staffing crisis province-wide and that something drastic has to be done to retain committed workers in this field."

We need to listen to the 1.5 million persons with disabilities in this province, and the government needs to listen. We need to make sure there's a voice around the cabinet table. We need to make sure that the minister responsible for disabilities issues is looking out for their interests.

1700

I want to talk about some other issues, too, that affect not only the province as a whole but that I see within the riding of Elgin-Middlesex-London. One thing that is very obvious is that rural Ontario is definitely under siege by this government. We need to see the Minister of Agriculture take real action and provide stability to the farm safety net programs in this province. The drainage program is of valuable importance to the farmers of this province. The drainage review that's taking place right now could seriously harm that.

I think one of the things that scared me the most was when I had an opportunity to listen to the Middlesex Federation of Agriculture. There are three representatives who represent Middlesex county. I listened to one of the Conservative members who represented Middlesex county. This is a really scary message that rural Ontario had better take heed of. He talked about the Conserva-

tives' rural caucus, that there are so few members within the caucus who are from rural Ontario, but around the caucus table and the cabinet table it's all a numbers game; it's all about percentages and looking at 416 and 905. They run; they rule. Then he goes on to say, "You may not like the answer I'm giving, but that's reality." That's very scary, for rural Ontario to know that they really don't have a voice around the table of the Conservative caucus.

Let's talk about transportation. We should see a good portion of the fuel tax dedicated to the roads of this province. Instead, it goes into general revenues. Plus, you've downloaded roads to municipalities—roads that municipalities are going to have a really tough time dealing with in the future. You need to make a substantial investment in the infrastructure of this province, an investment that this government is not making because you're so bent and determined on tax breaks. But you need to start looking at the crumbling infrastructure of this province. Look what has happened on the 401, the carnage that continues to happen on that highway. My riding has 82 kilometres of 401 in it. Over 50 kilometres of that in my riding do not have a centre-line barrier. That's all part of what has become known as Carnage Alley. The government initiatives that were announced last September by the Minister of Transportation have not done what he has intended them to do. We still haven't seen the 22 new police officers on the road. All we're seeing is Band-Aid solutions to the problem. Again, you need to look at what you're doing and make a long-term investment and do what's right, because the 401 is a major artery and you're neglecting it. You're neglecting it and it's costing people's lives.

In my own riding we have a road called Highbury Avenue. It's a two-lane road. The traffic on it has increased at a tremendous pace, but the local government, because of the downloading, doesn't have the money to invest in that. The province should be working to help get Highbury Avenue four-laned from the 401 to St Thomas so it can do the job it's supposed to do. Again, that's not happening.

I want to talk a little bit about the Better Roads Coalition, which talks about, is there an advocate for transportation. The Better Roads Coalition of Ontario says there's no single advocate to speak out for the needs of the total transportation system in our province. We need more money to be spent on transportation in this province. The transportation minister cannot speak about the needs of the citizens of Ontario who are faced with the collapse of a bridge in some remote area and the inability to rebuild it. Sadly, the current Minister of Transportation is no longer a Minister of Transportation. As a government, you need to reinvest in transportation and make sure those issues are looked after.

We've heard health care talked about over and over in the House today, about how important health care is to our communities. We need to look at what's happening within rural Ontario. There's a severe shortage of doctors—not just family practitioners, but specialists too.



The government needs to do more to ensure that persons in this province have access to a family practitioner. This \$3 million that the government quotes—and I'm sure once the figures are out it's going to be a lot higher—that they're spending on this advertising campaign to put down the federal government are dollars that would be better spent investing in health care in this province, instead of investing in slamming another level of government. Let's get both levels of government together and work together to fix health care and not just try to blame one another for the problems.

Our hospitals have seen severe financial cutbacks. I'm severely concerned about what's happening with the St Thomas Psychiatric Hospital. The governance of that hospital has just been transferred to the St Joseph's hospital in London. The past response from the government was that the hospital would remain open until 2003, and the key was the community supports need to be in place. There are indications coming right now as a result of this change of governance that this hospital process could be sped up and we could see either the London Psychiatric Hospital or the St Thomas Psychiatric Hospital closed sooner. What concerns me is that those community supports aren't in place.

Again, the government needs to be investing in those community supports before you close a single hospital bed. I'm going to do everything in my power to make sure that the government does not close a single bed.

**Municipalities:** The most mistreated entities by the provincial government are the municipalities. The government has never had respect for municipal governments in Ontario. The municipal government is the government that's closest to the people and there are a lot of you on the other side who were municipal politicians, and I don't know how you can sit there and smile and let your colleagues within the cabinet continue to download. Municipalities need to know that there's going to be long-term stability and predictability in the community reinvestment fund. They need to know that. But you need to work with municipalities, not work against municipalities. You need to seriously consider capital reinvestments. I've got the Aylmer Arena and the Rodney pool—very important to the recreation of the community. There are no capital dollars available. The government needs to start thinking about people and reinvesting in the local communities.

**The Acting Speaker:** Further debate?

**Mr Bert Johnson (Perth-Middlesex):** It's an honour and a privilege to rise today and support the motion for interim supply.

I'm pleased to support the interim supply motion, which gives authority to the government to continue its programs, the daily business of government and pay the salaries of the men and women of the Ontario public service.

It's also a privilege to rise today in the 21st century and speak on behalf of the constituents of Perth-Middlesex. Because I hear the birds are chirping and I know that the sun is shining in the great riding of Perth-Middle-

sex—all thanks to the efforts of this government—I also want to say at the outset what a privilege and a pleasure it is to stand in the House today and represent constituents in county Middlesex, specifically that part comprising the six former townships of London, Lobo, East Williams, McGillivray, Biddulph and West Nissouri, along with all of county Perth, which make up the new riding of Perth-Middlesex.

There are a number of issues that I want to address today which demonstrate how this government's policies and programs are benefiting Ontarians and my riding of Perth-Middlesex specifically.

On the issue of health care our government continues to put emphasis on quality care and I want to take this opportunity to commend the hundreds of health care professionals in my riding who deliver front-line services to the constituents of Perth-Middlesex. Since this government was elected, Perth-Middlesex through good fiscal management and priority setting of this government has received new funding for health care. There have been health care reinvestments in the area of community-based, long-term-care services, community-based mental health services, Healthy Babies, Healthy Children, preschool speech and language, transitional funding for restructuring and funding for the year 2000 compliance. I might say that I personally have been compliant now with the year 2000 for well over a year. Just last spring the health minister provided more than \$1.1 million in new funding to hospitals in Perth to allow them to hire more nurses. Is it enough? No. Is it a help? Certainly.

These are just a few areas where the Harris government has provided the health care funding so that hospitals in my riding can focus on priority areas so that patients can get the kind of treatments they deserve. There's no question that there's more work to be done in terms of health care reform and identifying emerging trends and growth areas. But the fact is this government knows what the priorities of Ontarians are. Our government was not surprised by a recent public opinion survey that showed that health care is the number one priority for all Canadians. This government knows, and has known for many years, that health care is becoming more expensive. This is why our government has continued to increase health care spending since our election in 1995, despite massive cuts by the federal government to the federal health care transfers.

1710

In addition to the good news on health care in Perth-Middlesex, I want also to talk briefly about tourism in Perth-Middlesex and specifically the Stratford Festival. The Stratford Festival is something that I'm particularly proud of. The festival is a Canadian landmark that all members of this Legislature can be proud of. I'm looking forward to the festival's opening night scheduled for May 29. The festival will be opening with *Hamlet*, starring Paul Gross, the Mountie from the popular TV show *Due South*.

According to a recent report done by the Conference Board of Canada, the festival's economic impact on the

local economy is \$340 million each year. The festival also generates \$64 million in tax revenues each year. I think it's also significant that the festival receives only 4% of their revenues from governments. Last year, 590,000 people attended the Stratford Festival, and about 40% of the people who attended were from the United States. The festival has become a major tourist attraction not only in Canada but for all of North America.

I want to congratulate the festival for their accomplishments and I'd like to encourage my colleagues in the Legislature to make a visit to the festival this year.

As the member for Perth-Middlesex, I cannot give a speech in this Legislature without talking about the importance of agriculture and the hard-working farmers of Ontario and of Perth-Middlesex. Like governments, farmers have been faced with some difficult decisions over the past couple of years. The interim supply motion is relatively easier for the government, as it allows us to continue programs, pay bills and ensure that members of the Ontario public service are paid. This is fairly straightforward. Farmers don't get the chance to debate on an interim supply motion that allows them to continue to operate, pay their bills, feed their livestock and so on. They have to go hat in hand—maybe that's cheque in hand—to the seed dealer, the fertilizer dealer and the implement and fuel dealers before they can start their spring seeding. Thanks to the efforts of my colleague the Minister of Agriculture, Food and Rural Affairs, farmers in Ontario and in my riding of Perth-Middlesex are starting to get their fair share of federal safety net dollars.

I also want to commend the members of the commodity groups in Ontario who have been working with the minister to secure additional money from the federal government, money that rightly belongs to Ontario farmers.

Agriculture is a big business in my riding, and it has links with almost every sector of our economy. In Perth country it's a billion-dollar business that employs nearly one third of Perth country's labour force. Those are some highlights from a recent study that was released by the Perth Country Federation of Agriculture on the impact that agriculture has on our local economy. The report also states that agriculture production in Perth county ranks ahead of New Brunswick, PEI, Nova Scotia and Newfoundland. There are almost 700 businesses in Perth country that are related in some way to agriculture and are dependent on it.

There is more work that has to be done for Ontario farmers, and I'm listening to the concerns of the farmers in my riding. Two weeks ago I met with farm leaders of Middlesex county and next weekend I'm meeting with the farmers of Perth county. I'm listening to my constituents. I know that this government is listening and consulting with Ontarians. This is a government that listens, contrary to the popular mythology and folklore, most of which is repeated by those opposite. I'm pleased that my colleague on the Task Force on Rural Economic Renewal had the opportunity to visit St Marys a couple of weeks ago to listen to local residents and to hear ways to enhance the economic opportunities in rural Ontario.

I wanted to make a statement about the impact on the Ontario economy. It was stated a little earlier that cultural organizations are facing a crisis because of our government action. Indeed, local governments have the authority to waive those changes in assessment and taxes for the owners of those cultural facilities.

People in my riding are confident and are spending again because of the renewed sense of optimism. The debate is over. Tax cuts do create jobs. Tax cuts also increase government revenues, which allows us to increase funding in priority areas, such as health care, education and infrastructure.

I appreciate the opportunity to stand before you today.

**Mr Caplan:** It's indeed a pleasure to join the debate on the interim supply motion. It's been quite some time since this House has been in session. We sat for, I think, a grand total of about 40 days last year. This session is supposed to be about 43 days. It's amazing how this government would rather spend more time outside rather than doing the business that the people of Ontario fully expect them to do.

In the interim, I've had the opportunity to be able to speak to community residents. Back in the fall in fact I had community representatives from the Henry Farms neighbourhood come and talk to me about a concern they had. Their community is along the 401, right around Leslie Street. Surprisingly enough, when the highway noise barrier was constructed back in the 1970s, there was a stretch which was not built. These community residents have noticed that in the years since then, over about a 20-year period of time, there has steadily been an increase in the amount of noise. I don't think anyone would dispute that we've had a significant increase in the amount of traffic. The gridlock on our highways, on our streets is well documented and is not disputed by anyone in this House. We've in fact had a great deal of construction which has taken place along that particular stretch. These noise levels, in the opinion of the community residents, have changed the nature of the community, have made it quite less liveable than it once was.

The community representatives from Henry Farms came to me and said, "Is there something we can do?" The first thing I did was I immediately sent a letter to the Minister of Transportation. To be fair, the minister responded very quickly and said, "Yes, we'll study the problem, find out if in fact the noise levels have gone up and do exceed what the ministry expects as their minimum standards." That study was carried out. The minister replied that they did an acoustical study. They confirmed that the noise levels—the maximum is about 55 decibels that they would consider acceptable. Over that, a noise barrier is supposed to be constructed. They had decibel levels of 68 and 69, which are significantly above the ministry-accepted standard.

Of course you would expect, Speaker—and I know that you've been around this place a great deal—that when governments realize their own standards are exceeded, action is taken. In this case, the minister said no. The minister said that the extension of a noise barrier



wouldn't reduce the noise significantly enough to suit him to be able to alleviate the concerns of the community residents. He said the barrier was, in his opinion, a waste of taxpayers' money. He estimated it was going to cost between \$350,000 and \$600,000.

I had a conversation with the minister following his letter and he confirmed the facts in his letter and he confirmed much that was in the technical report and that he was not willing to spend the dollars. He was not prepared to be flexible at all. He was not prepared to be sensitive to the community concerns and sensitive to the standards of his own ministry. Instead, I asked if there were other solutions that could be entertained. I asked what options the residents would have. Apparently they would just have to live with it. They would have to live with a noise level which exceeds the ministry's own standards. That is, to me, unacceptable. It's unacceptable to the community residents. It should be unacceptable to this government, but obviously it's not.

You see, today we're discussing a supply bill. A supply bill is about the spending of a government. This government would rather spend, so far, \$3 million on self-serving, partisan advertising that doesn't go to help anybody's health care.

1720

That money could be used to extend the noise barrier along the 401 and give the community residents peace of mind. You wouldn't be surprised that I had about half a dozen members of the Henry Farms community call me and ask why the Harris government would waste their money instead of putting it to useful purpose protecting their community, ensuring that they had a community which not only lived up to the standards that this government had but would be a very liveable community.

I suggest that this government has its spending priorities all wrong. As we've seen the scandal unfold at the Ontario Realty Corp—and I know my colleague from Perth shares these concerns—they would rather have fire sales of properties, rip off Ontario taxpayers, see them get burned and forgo all that revenue. The \$10 million that we've uncovered so far would go a long way to solving this kind of a problem. It is absolutely scandalous that not one member of the government would stand up and ask a substantial question to a cabinet member. All they want to do is stand up and say, "Gee, Minister, how great are you and how did you get to be that way?" It's absolutely shameless.

I want to talk to you about another community concern that we have in Don Valley East. St John Fisher school, which isn't in Don Valley East—it's just on the other side of Victoria Park—is closing. In September practically all of the kids who are currently attending St John Fisher will be going to Blessed Kateri, which is in Don Valley East. Blessed Kateri is not a large school by any means but their population will more than double.

In fact, I was at a meeting last week with the combined parent councils of both schools and I want to tell you that although this government, through their funding formula, through their dictates, through their

edicts, is causing the closure of this school, they're going to try and make it work, but there are significant problems. Three or four portables will be going up on the west side of the school. That's a given. There is no way around it. You can't fit almost 300 students into a school that has a program-rated capacity of about 200. I know there are former members of school boards who sit on both sides who would be able to tell you that. Of course, as you know, the funding formula does not provide any funding for the portables that will be going on to Blessed Kateri.

There is a school-age day care program. As well, the school-age day care is used by the parents in the particular school. Those children are now going to have to be displaced. In fact, many of them will be going into the portables that are going to be set up.

This is a K to H school and they need change and shower facilities. The showers are going to be closed. They will be converted to change rooms, and the change rooms are going to be refitted into specialized special ed and conference rooms. There are going to have to be significant changes to the school as well. The adjoining walls in the dental and French offices, which won't exist any more, are going to have to accommodate a multiple special needs program.

Extensive capital costs are going to have to be levied as a result of this government's funding formula and edicts, to the tune of about \$120,000. Some of it will go to make the school accessible, and I think that barrier-free access is certainly something we should all be supporting. Of course, there will be significant local traffic, busing and parking issues. But this school re-tooling and the closure of other schools needn't have happened except for the stubbornness, the wrong direction and the spending priorities, or the misguided spending priorities, of the Harris government.

I wanted to speak very quickly of one other issue. It's come to the attention of myself and the rest of the province that the Minister of Municipal Affairs and Housing sent a letter to local housing authorities across the province to draw up plans to sell off scattered housing units; single and semi-detached homes that families are living in. In the midst of the worst affordable housing crisis we have ever seen, this government intends to liquidate those assets and displace those families. It is an entirely shameful act. It is amazing that in the midst of a scandal into the sale of government properties, into a rip-off of taxpayers being burned by selling government assets at fire sale prices, this minister would want to entertain such a notion. It is going to create untold hardship. Not only that, but what the Harris government is doing is really Machiavellian. They are taking the very best assets, they are directing the liquidation, but they are placing the burden on municipalities and municipal taxpayers to have to find housing and accommodation and support for the people who will be displaced. These are the kinds of priorities the Harris government has shown.

It is no wonder they have not wanted to be in the House, to be held accountable, to have hard questions

asked of them, to be shown for what they truly are. They wish to come here and try to paint a glossy picture and, if that doesn't work, they're going to mail it to your home or put it on the airwaves. But the people of Ontario aren't fooled, certainly the people of Don Valley East aren't, and I can tell you that the opposition is vigorous.

**Mr David Christopherson (Hamilton West):** Let me say at the outset that I am fighting a cold, so I'll do my best not to cough and sneeze throughout, but if I need to make use of the tissue, you'll understand why. Although, when I look at what you're doing to Ontario, that brings tears to my eyes too and that could cause me to need a tissue.

The first thing I want to do is just follow up on a point that was made by my colleague Shelley Martel from Nickel Belt. She was talking about cancer centres and the real crisis that exists certainly all over Ontario and particularly in the north, and it was mentioned by the member for Oshawa that the cancer centre in Oshawa was due to open on schedule. He said that everything is on schedule now. It was cancelled once but it's on schedule. We just want to bring it to the attention of the member for Oshawa and all the members of the House that it's not on schedule.

The history of that cancer centre in Oshawa is that in October 1994, under the NDP government, we announced that that would be one of two new cancer centres that were to be opened, and they were to be opened by 1998. This government first cancelled that cancer centre in Oshawa. Then, I suppose under pressure, they announced that indeed the plans were back on. However, the people in Oshawa and the entire catchment area served by that cancer centre will have lost at least three years of the benefit of that cancer centre that should have been completed and open for public use in 1998. So in terms of keeping the record straight, there's the record on that issue.

I also want to begin my comments about the interim supply bill by just referencing a couple of the points that the member from Willowdale raised. I don't single him out for any particular reason other than that he was the first one I just jotted down who had raised these issues. I'm sure every Tory here does it often: That is, they say that Mike Harris's tax cuts are what are driving the booming economy that they seem to think we uniquely have here in Ontario.

As the finance critic for the NDP, I sat on the standing committee on finance and economic affairs which held hearings just a couple of months ago in terms of a pre-budget consultation process. During that pre-budget consultation, yes, we had the finance minister come forward, and he led the charge that it was their tax cuts that have caused the economy to be booming the way it is, and they brought in some of their friends who made the same argument. But, lo and behold, there were an awful lot of non-aligned, non-partisan economists who came in and said that it is the American economy that's driving ours, in particular the auto industry. For most people watching or thinking about this, that won't come

as a surprise, but that is the reality in the case of the nonsense that the government continues to spread around in terms of taking credit for what is a North American economic boom, the biggest ever in the history of North America, by the way. The reality is, it's being driven by the American economy and in particular the auto industry.

**1730**

Now, we should remember and not lose sight of the fact, as one of the ministers mumbles away under her breath over there in the front benches, that this government had to borrow all the money necessary to pay for that tax cut. That's billions of dollars that could have and should have gone into our education system, into our health care system, into protecting the environment, into ensuring that our streets are safe and that we have enough police officers. All those things come second to you. You made sure the tax cut was paid for even though you had to borrow every dime to do it. Who benefited most? The very wealthy. For the average Ontarian—

**Hon John R. Baird (Minister of Community and Social Services, minister responsible for francophone affairs):** The unemployed.

**Mr Christopherson:** I would ask the minister of Comsoc, how does a tax cut help the unemployed? What are you talking about? You are so interested in spinning out the lines that you don't bother answering the obvious question. The question is, how can a tax cut benefit somebody who doesn't even have a job? That's how out of touch you are, Minister, and it's scary, given the portfolio you've got.

The fact of the matter is that this government, because they borrowed that money—when we had to borrow money as a province on the international bond market, the rate we had to pay internationally on the day that Harris took over from Bob Rae as Premier was exactly the same rate as the day that Harris called the election after being in office for four years. Every economist who looked at the economy of Ontario said that in spite of a booming economy, as part of the booming North American economy, in borrowing the money to pay for your tax cut you are not maximizing the performance of this economy, the exact opposite of what you say.

I want to quote and put on the record comments from some of the economists I have mentioned. The first one I want to comment on is from Doug Porter, who is the senior economist and vice-president at Nesbitt Burns. I'm reading from the NDP's dissenting report from the government majority report of the standing committee on finance and economic affairs. Mr Porter, the senior economist and vice-president at Nesbitt Burns, pointed out that the booming auto exports to the US were playing a major role—I'm paraphrasing—in pushing the Ontario economy. But he goes on to say this, and this is interesting:

"Make no mistake, we are at the crest of an auto boom.... [It's] very hard to believe that the kind of auto sales we saw ... are sustainable going forward."



John McCallum, who is the chief economist for the Royal Bank, was warning that if the US economy continues to grow, it could cause problems for Ontario; inflation could rise and Ontario's economy would therefore slow. He says, however, "But we'd land"—we, Ontario—"abruptly rather than softly, because Ontario, Canadian and US households have record levels of debt and there's nothing like a two-percentage-point hike in interest rates to bring considerable distress to North American households."

As was brought out at the hearings, we now have the lowest rate of personal savings that we've ever had in the history of Ontario and the highest level of personal debt. Ordinarily people would sort of just glaze over and say, "Why would I need to worry about that?" The reason we need to worry about that is because both these economists are indicating and signalling to us that this booming economy will not last forever. Given how many people are now not receiving a defined pension but have their whole future staked in mutual funds and in the stock market, if this economy falls sharply, what's going to happen to the future retirement of all these people? What happens if the mutual funds that someone who is between 55 and 60 holds drop by 50% or 60%? Where are they?

The other thing I worry about is, if we take a look at the kind of cuts and damage this government has done to health care, education, social services and every area of government that they're responsible for, if we take a look at what they've done in the boom times, God help us with what they would do in tough times, because they have consistently made tax cuts and a balanced budget more important than anything else, including health, including education.

In fact, in the ramp-up to the federal budget, the Tories were taking out ads. What were they saying was the number one priority that Ontarians care about? Of course, as everyone knows, the number one issues in this province is health care. Is that what they were pushing the federal government to make their top priority? No, it was not. They spent money—I think it was party money, but nonetheless the most important message to them wasn't health care; it was tax cuts—tax cuts, by the way, that, had they been implemented the way this government wanted, would have resulted in about \$3.4 billion less revenue for Ontario unless they hiked Ontario taxes or completely revamped the system, and I understand that's being looked at. Funnily enough, they may find fellow travellers there that they weren't otherwise expecting. But as it stands now, we don't have that system, and had Chrétien done what Harris wanted, we would be out \$3.4 billion.

How on earth is that going to help the number one issue that people care about, which is health care? How does it do that? It doesn't. What it does, though, is take care of Mike Harris's friends—his rich friends, by the way.

Let's take a look at what has happened over time. Now that you've been in office long enough to have a track record, let's see what that track record says. One of

the people we had come forward was a woman named Armine Yalnizyan, who is an economist with the Centre for Social Justice. Ms Yalnizyan came forward and pointed out that if you look at the StatsCan figures—not hers, not ours; StatsCan figures—when you look at the gap between the lowest-income people in Ontario and the highest-income people—they did this by taking the average of the lowest 10% income earners in Ontario and the highest 10% income earners; they averaged those two categories and compared how they related to one another over time—what did we find? In 1990, when the NDP took power, it was about 7.3 times. The average of the lowest-paid 10% of income earners in Ontario received about 7.3 times less money than the average of the top 10%. In 1991, heading into the worst recession we've seen in the history of Ontario, of Canada and North America since the Dirty Thirties, it dropped to 6.8 times. That means the gap is getting closer, that there's not the discrepancy there was the year before between the very wealthy and the very poor. It's a good measurement of how we're doing as a community, defined as Ontario.

In 1992 it dropped to 6.7, in 1993 it was down to 6.2 and in 1994 it was even below that, marginally below 6.2. Then Mike Harris takes power. Health care is no longer the number one issue. Education is no longer the number one issue. Caring about the average Ontarian is no longer the number one issue. The only thing that matters to Tories is tax cuts for their wealthy friends. In 1995 we're on our way back up—we're back up to about 6.4 times; in 1996 we're up to 7.2; and now we're up to 7.8 times, right back where we were.

1740

What that shows is that economic growth alone isn't the answer. Is it an important part of the answer? Absolutely it's an important part. But is it the only thing that matters, economic growth? Is that the only thing we have to worry about, that if there's economic growth we can leave it over there and it's on autopilot, and collectively, as a society in Ontario, we can go about our other business because fairness and justice and equity and a sharing of the wealth that this great province creates is all being taken care of? No. If it were, you wouldn't see these kinds of numbers. What this shows is exactly what you were told was going to happen.

Further, Ms Yalnizyan's results showed that there are more people in poverty than ever before and the poor are poorer than they've ever been before. Yet the gap between those who have and those who don't have grows. Under the NDP, in the toughest economic times we faced, that gap was shrinking. Shouldn't that be the goal of everyone in this House, that yes, we have a thriving economy that's providing the jobs and the money we need, but that it's delivering the jobs and the money and the wealth in a way where everyone is at least in the game?

**Mr John O'Toole (Durham):** That's called communism.

**Mr Christopherson:** Oh, listen to this. The member from Oshawa says, "That's called communism." Not

Oshawa—Durham. I should know it: John O'Toole. My God. "That's's called communism." You know, John, give your head a shake. If they give you a further-back bench, you'll disappear from this place.

**Mr O'Toole:** Come on, Dave, be nice.

**Mr Christopherson:** Oh, I see, John. I see. You can throw the shots, John, but you can't take them. Is that it? Is that what it is? You can't play grown-up here? Then you ought not to be flinging things across the floor, and then maybe you wouldn't get them back. Think about that, John.

Let me also point out what John McCallum said, who, I remind the member, is the chief economist for the Royal Bank. Do you want to call him a communist too, John? This would be John McCallum, the chief economist for the Royal Bank. After I read his quote, I suppose you're going to want to call him a communist too.

Mr McCallum said—you should listen because this is something to think about.

**Hon Mrs Johns:** I don't think so.

**Mr Christopherson:** You don't think so. One of the ministers of the crown doesn't think she needs to listen to anything the chief economist for the Royal Bank has to say. Talk about arrogance. That's just the kind of arrogance we get here every day.

Mr McCallum said, "You could argue ... that all these calls for tax cuts today, which will favour the baby boomers who are in their peak earning years, are kind of like pigs at a trough.... It's these people who have benefited from the deficits, and they will be saddling their children with a higher debt when it comes to their retirement."

That's the chief economist for the Royal Bank. And yet every one of you will still go out and spin the line that tax cuts mean everything, that economic growth means everything, and therefore you have the right to ignore all other matters in front of you. It is such a crying shame that this is what's happening during the biggest boom.

Speaker, you must be fearful too about what would happen to Sault Ste Marie if we went into a deep recession and this government maintained, which I suspect they would, that their tax cuts and their balanced budget are more important than the health care and education of people in Sault Ste Marie, Sudbury, Nickel Belt and Hamilton. It's shameful and it's terrifying.

I just want to touch a bit, in the few minutes I have left, on health care. This government talks about spending more and more money on health care. The reality is, when you look at per capita spending, between 1995 and fiscal 1998-99 there's \$93 less per Ontarian being spent on health care.

That means that for Ontarians there has effectively been a \$1.97-billion cut in health care, almost \$2 billion.

What does that mean on a personal and community level? Anybody who was in the House or watching

would know that there were hundreds of people from Hamilton, particularly Hamilton Mountain, here today in response to a coordinated effort by the member for Hamilton Mountain and the local Save the Henderson Committee, who came out calling on this government, and the Minister of Health in particular, to step in and save the Henderson hospital.

Why is the Henderson hospital on the chopping block? In large part because you cut \$40 million net out of the budget of the Hamilton Health Sciences Corp. But the stats are showing us your rich friends are getting richer, so everything is OK, right?

The federal Liberals are no help, because by the amount of money they have cut and by refusing to come to the table with enough health care money, they are giving Harris, as they gave Klein, a perfect opportunity to blame the federal government and use it as an excuse to create a privatized, two-tier health care system. That's what the federal Liberals are doing by refusing to give back the money. I have to say it is interesting that in the early 1990s, when these cuts first started under Mulroney and we were saying, "This is a serious challenge to our health care system," we were told by the then leader of the third party that we were whining; that we didn't have a revenue problem, we had a spending problem.

Now, of course, the shoe is on the other foot. We're running ads and putting resolutions on the floor of the Legislature, everything to pressure the federal government to do what we in the early 1990s were saying needed to be done, and that is to force the feds—whether they're Tories, Liberals or NDP doesn't matter. I don't care who is in power. The argument was that that money should not be taken out of the health care system, and that's why we had so many people here today from Hamilton protesting what is happening to Henderson hospital.

I have to say, in the final moments I have, that one of the major things that would make a huge difference to people is to raise the minimum wage in this province. The last time it was raised was under the NDP. The poor are further in debt and further in poverty than they've ever been, and that's the economic legacy that Mike Harris leaves.

**The Acting Speaker:** Mr Eves has moved government notice of motion number 33.

Is it the pleasure of the House that the motion carry?

All those in favour will please say "aye."

All those opposed will be please say "nay."

In my view, the ayes have it. I declare the motion carried.

It being almost 6 of the clock, I declare the House adjourned until tomorrow at 10 of the clock.

*The House adjourned at 1748.*



**LEGISLATIVE ASSEMBLY OF ONTARIO**  
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Clerk / Greffier: Claude L. DesRosiers

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Barrie-Simcoe-Bradford	Tascona, Joseph N. (PC)	Hamilton West / -Ouest	Christopherson, David (ND)
Beaches-East York	Lankin, Frances (ND)	Hastings-Frontenac- Lennox and Addington	Dombrowsky, Leona (L)
Bramalea-Gore-Malton- Springdale	Gill, Raminder (PC)	Huron-Bruce	<b>Johns, Hon / L'hon Helen</b> (PC) Minister of Citizenship, Culture and Recreation, minister responsible for seniors and women / ministre des Affaires civiles, de la Culture et des Loisirs, ministre déléguée aux Affaires des personnes âgées et à la Condition féminine
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Brampton West-Mississauga / Brampton-Ouest-Mississauga	<b>Clement, Hon / L'hon Tony</b> (PC) Minister of Municipal Affairs and Housing / ministre des Affaires municipales et du Logement		
Brant	Levac, Dave (L)	Kenora-Rainy River	Hampton, Howard (ND) Leader of the New Democratic Party / chef du Nouveau Parti démocratique
Broadview-Greenwood	Churley, Marilyn (ND)		
Bruce-Grey	Murdoch, Bill (PC)	Kingston and the Islands / Kingston et les îles	Gerretsen, John (L)
Burlington	<b>Jackson, Hon / L'hon Cameron</b> (PC) Minister of Tourism / ministre du Tourisme	Kitchener Centre / -Centre	Wetlaufer, Wayne (PC)
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Carleton-Gloucester	Coburn, Brian (PC)		
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Davenport	Ruprecht, Tony (L)	Lanark-Carleton	<b>Sterling, Hon / L'hon Norman W.</b> (PC) Minister of Intergovernmental Affairs, government House leader / ministre des Affaires intergouvernementales, leader parlementaire du gouvernement
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Guelph-Wellington	Elliott, Brenda (PC)		
Haldimand-Norfolk-Brant	Barrett, Toby (PC)		
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Halton	Chudleigh, Ted (PC)		
Hamilton East / -Est	Agostino, Dominic (L)		

Constituency Circonscription	Member/Party Député(e) / Parti	Constituency Circonscription	Member/Party Député(e) / Parti
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Niagara Centre / -Centre	Kormos, Peter (ND)	Scarborough-Agincourt	Phillips, Gerry (L)
Niagara Falls	Maves, Bart (PC)	Scarborough-Rouge River	Curling, Alvin (L)
Nickel Belt	Martel, Shelley (ND)	Simcoe North / -Nord	Dunlop, Garfield (PC)
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Oakville	<b>Carr, Hon / L'hon Gary</b> (PC) Speaker / Président	Stoney Creek	Clark, Brad (PC)
Oshawa	Ouellette, Jerry J. (PC)	Stormont-Dundas-Charlottenburgh	Cleary, John C. (L)
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		York South-Weston / York-Sud-Weston	Cordiano, Joseph (L)
		York West / -Ouest	Sergio, Mario (L)

A list arranged by members' surnames and including all responsibilities of each member appears in the first and last issues of each session and on the first Monday of each month.

Une liste alphabétique des noms des députés, comprenant toutes les responsabilités de chaque député, figure dans les premier et dernier numéros de chaque session et le premier lundi de chaque mois.



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Gilles Bisson, Claudette Boyer, Brian Coburn,  
Garfield Dunlop, Raminder Gill, Pat Hoy,  
Frances Lankin, Bill Murdoch  
Clerk / Greffière: Anne Stokes

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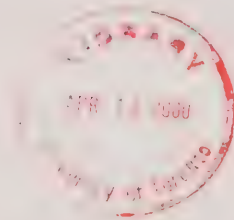
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**Thursday 6 April 2000**

**Jeudi 6 avril 2000**



**Speaker**  
Honourable Gary Carr

**Clerk**  
Claude L. DesRosiers

**Président**  
L'honorable Gary Carr

**Greffier**  
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# LEGISLATIVE ASSEMBLY OF ONTARIO

Thursday 6 April 2000

# ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Jeudi 6 avril 2000

*The House met at 1000.  
Prayers.*

## PRIVATE MEMBERS' PUBLIC BUSINESS

### MUNICIPAL AMENDMENT ACT (RENTAL HOUSING PROTECTION), 1999

#### LOI DE 1999 MODIFIANT LA LOI SUR LES MUNICIPALITÉS EN CE QUI CONCERNE LA PROTECTION DES LOGEMENTS LOCATIFS

Mr Marchese moved second reading of the following bill:

Bill 30, An Act to amend the Municipal Act to authorize certain municipalities to restrict the demolition of rental residential buildings / Projet de loi 30, Loi modifiant la Loi sur les municipalités en vue d'autoriser certaines municipalités à restreindre la démolition d'immeubles d'habitation locatifs.

**Mr Rosario Marchese (Trinity-Spadina):** Mr Speaker, this is a very important bill for the New Democratic Party. It continues to be a worry for us as a party. When we were in government we realized that we needed to build decent and affordable housing for people, because we know that not everybody in this society is wealthy enough to afford the kind of rental accommodation at the high end, and they certainly cannot afford the kind of condominiums that have been built under this government.

Our bill does the following: We know the provincial government doesn't want to build any housing, so what we want to do through this bill is give cities power to control the demolition of rental buildings unless some conditions are met, and I want to read those into the record so that whoever is watching our proceedings will understand what we are doing.

"The council of a local municipality having a population of 25,000 or more may, by bylaw, prohibit the demolition of rental properties in the municipality unless one of the following conditions is fulfilled," and there are four:

"(1) The council is satisfied that the rents that were charged for each rental unit in the rental property one year before the proposed demolition were at or above a level specified by the council.

"(2) All or part of the rental property is, in the opinion of the municipality's chief building official, structurally unsound.

"(3) The council is satisfied that the rental property will be replaced by a new rental property with rental units of a similar number, type, size and level of affordability.

"(4) The council is of the opinion that the demolition of the rental property will not adversely affect the supply of affordable rental housing in the municipality."

Those are the conditions we put forth. Otherwise, the city has the power to say to a developer or to an owner of a rental building, "You can't tear that building down."

This doesn't solve the problem of affordable housing across the province, because it doesn't deal with the construction of housing, as you understand, Speaker. You know that the federal government has abandoned us. You may also know that in 1990 your colleagues at the federal level, through Mr Paul Martin, the Minister of Finance, co-authored a report saying we needed a national strategy on housing, because he understood there needs to be a role for the federal government in the construction of housing. He knew that in 1990, when he was in opposition. But when he formed the government, along with M. Chrétien, they abandoned a national policy on housing. In fact, they continue to devolve all their responsibilities to the provinces and say, like the provincial government, that they are not in the housing business. Although they have committed some dollars to support housing initiatives generally across the country, there is not a single cent for the construction of housing.

I know my Liberal friends beside me will decry the policy of the federal Liberal government—I am convinced. And I know that when the three speakers here will speak to this, they will admit that the federal government has abandoned its national responsibility for the construction of housing, and that if they should be in government they would not do the same. I know they will say that, and I want to hear that.

In my view, what the federal government has done is negligible, negligent and wilful. In knowing they should play a role and not doing it, in my view, they have been a part of the destructive problem in this country, a part of the national disaster we are decrying here in Ontario in terms of homelessness, and a housing disaster that most people of modest means simply cannot afford to have decent, affordable and accessible housing.

At the provincial level, we know that Mike Harris says, "We're not in the housing business." He says that

what we as New Democrats did was bad. We argue that we constructed housing because it was healthy competition in the private market, that when you have non-profit housing, co-operative housing and similar types of housing, it makes housing competitive. We know that the buddies of the Conservative government said: "This is bad. We don't like this kind of competition. We don't like governments getting into the housing business, because it cuts into our business." We say that, as part of this free-market system, offering affordable, accessible housing is a good thing, as a way of not only making housing accessible but keeping rents down and affordable.

They have different interests, and they listened to those who are very wealthy, the big property owners, who told them, "Leave the job of construction to us." But we know that the private sector has not been building any affordable units except, of course, condominiums that are inaccessible to those of modest means. That's not what we need. What we need are units that people who make \$20,000 to \$30,000 can get into. These days we need units that most people who make \$40,000 to \$50,000 can afford, because it's becoming a more difficult problem for people.

You know that wages have gone down in the last 10 years. Wages have gone down, and rents have gone up. Rents have gone up approximately \$1,200 for a two-bedroom unit, and you know that wages have been frozen for most people since the 1990s. So we have a serious problem on our hands.

While we know the federal government doesn't want to spend money to build, and we know the provincial government doesn't want to spend money to build, we propose a modest bill that says: "Let the municipalities control the demolition of their buildings. Let's keep affordable stock." That is a modest power that you are giving to municipalities. When you downloaded services to the municipalities you said, "Don't you trust municipal governments to do the job?" When you downloaded housing as a responsibility on the cities, did you not say: "The cities are best suited to provide housing, because they know what they're doing. Don't you trust them to do that job?" In the same way that you fine Tories made that argument, I hope you'll permit this modest bill to go forward, because this says, "We trust municipalities, local governments, to do what is best for their citizens."

This bill cuts across the entire province. This bill empowers municipalities to protect the housing stock in the context of a housing crisis. I hope that the Tories will support this bill.

1010

**Mr Brian Coburn (Carleton-Gloucester):** I appreciate the opportunity to rise today to speak against Bill 30. As parliamentary assistant to municipal affairs and housing, I have more than a passing interest in this debate. Bill 30 represents the grief and the frustration felt by landlords and tenants with the NDP rental policy, which certainly wrecked havoc in this province during their mandate. Through the NDP policies of restriction

and limitation, they effectively brought this province into the depths of economic despair. In stark contrast, our government has worked hard to raise Ontario to new heights. Over 670,000 new jobs have been created since 1995, and Ontario once again leads all of Canada in economic growth.

One of the reasons why this government has been able to make such dramatic economic recovery is because of our focus to create growth and investment. With growth and investment, everyone benefits, through greater choice and greater opportunity. Therefore, I wasn't surprised to learn that the member for Trinity-Spadina has put forward a bill that would effectively mute future investment in affordable housing. Nor was I surprised to find so many others who are opposed to NDP rental policies.

"Landlords Vow to Outlast NDP Regime" was a headline that ran on January 2, 1992, in the *Toronto Star*. The opening line is a quote from Harry Taylor, who happened to be a landlord in the former municipality of East York, who stated that in four years' time he had hoped a new government will "recognize the cost of doing business as a landlord." In fact, Mr Taylor had grown so frustrated with the NDP rental policy that he was quoted as saying that he'd sooner stuff his money into a mattress than sink more into his East York apartment block.

Is this the rental policy that we wish to create? As parliamentary assistant, I can assure my colleagues that that is not the case. Bill 30 would only manage to re-introduce the frustration and angst expressed by Mr Taylor. Luckily for Mr Taylor and the people of this province, his wish for a new government came true. The need for change was acknowledged and came about in the form of Bill 96, the Tenant Protection Act.

Bill 96 was designed to restore the balance and the fairness to the rental system. Our focus was clear: to establish an environment to encourage investment in the construction of new rental housing and to secure the rights of tenants. To secure the rights of tenants; that's worth repeating. We created a balanced system by empowering landlords and investors with the flexibility to properly manage the growth of their investments. This ultimately serves to the benefit of the investor, the tenant and the province. Bill 96 allows municipalities to use their official plan policies to manage conversions and demolitions in the best interests of their constituents. Through that planning exercise, they have the ability to forecast and protect their communities and design for future growth.

As you can clearly see, Bill 30 would destroy that flexibility and balance that have contributed to the success of the current system. As a result of our policies, investment strategies such as the mattress stuffing are no longer publicly threatened as stories of hope and prosperity begin to appear.

For example, in a story that ran in the *Ottawa Citizen* on August 18, 1997, Mr Greenberg of Minto Developments, one of the premier builders certainly in our province, stated, "In the next two weeks, Minto will be



announcing a three-year, \$25-million capital improvement program for our Ottawa portfolio." That is a substantial investment, and "Bill 96 is one of the main reasons we've got the confidence to make such a massive investment." Mr Greenberg goes on to say, "Bill 96 represents an important, symbolic first step to providing tenants with truly their best form of protection," which is choice.

Mr Greenberg wasn't the only one praising our policies. Prominent Liberals have also praised the Tenant Protection Act. Just ask the Liberal chief of staff about his comments that appeared only last year in the *Toronto Star*. In reference to the OMB decision preventing the city of Toronto from removing an investor's right under the Tenant Protection Act to convert apartments to condos, current Liberal chief of staff Philip Dewan said: "Current tenants need not fear for their apartments. The Tenant Protection Act provides that any tenant in a building being converted to a condo would have the right to remain for life. It's far more reasonable to have constant rules than to have a city council going on a deal-by-deal basis." Not only does the Liberal chief of staff support our legislation, but through this quote he clearly disagrees with the intent of Bill 30. Bill 30 does not serve the best interest of Ontarians; it only serves to undermine the progress that this government has made.

**Mr David Caplan (Don Valley East):** It's certainly a pleasure to join the debate on Bill 30. At the very outset, I just want to make it very clear that I and the Liberals support measures of protection for tenants from the demolition, from the reduction of the affordable housing supply. Of course, the member didn't acknowledge in his remarks, but I know he would, that it was the former Liberal government which did introduce the Rental Housing Protection Act in Ontario which, of course, was repealed by the introduction of Bill 96.

The previous speaker, the parliamentary assistant for the Minister of Municipal Affairs and Housing, was extolling the virtues of that piece of legislation. It's interesting that when the Minister of Municipal Affairs and Housing was at the Urban Development Institute, a scant 10 days to two weeks ago, he was whining to the developers saying, "Why aren't you building affordable rental housing?" It was an absolute whine, a repudiation of just about everything the member just said, that his own minister, the member he serves, has acknowledged to the developers, to the landlords, that in fact there is virtually no construction of rental housing going on in the province.

As I said, we support these measures and as such I'll be supporting the bill, of course, in principle, even though I do have major concerns about the approach in this bill. I think that we really need to pass it, get it into committee, introduce some amendments, so that we can make sure it is an appropriate, sensible and workable bill.

Let me tell you about some of my concerns about Bill 30. I have a concern about the role of municipalities. The member read into the record the four conditions that he's attaching to the prohibition of demolition, and the first

one is really very strange: "The council is satisfied that the rents that were charged for each rental unit in the rental property one year before the proposed demolition were at or above a level specified by the council." Frankly, councils don't have the power and the authority to specify what the level of rent should be, nor should they.

Is the member seriously proposing that a municipal council now take on the power to assess each rental property within its borders? That's a ridiculous provision. I think it's probably misworded by this member. One of the reasons why we need to get it into committee is to clean up that kind of wording.

I really have no doubt that municipalities are very interested in protecting the rental stock. The city of Toronto in fact had moved a similar bylaw to protect their rental properties, the character and nature of their neighbourhoods here in the city. It was Progressive Conservative Tory activist Jane Pepino shilling on behalf of landlords to be able to get the demolition, to challenge that bylaw, and it was the Ontario Municipal Board appointed by this Conservative government, Harris appointees, which struck down the Toronto bylaw. I again differ with my colleague opposite about the council's ability to protect their neighbourhoods through the Planning Act when you have an activist Ontario Municipal Board in contradiction to what assurances were given, not only by this member, but by the minister and his predecessor on the introduction of Bill 96.

We've seen in Toronto, we've seen in Ottawa, we've seen in Hamilton an interest in the preservation and protection of rental property. I've had meetings with many municipalities, with tenants, with activists, with people who are interested in protecting rental housing in all of its forms, and they have some very real concerns about what the Harris government has done.

I have concerns, of course, about the aspects of this bill. As I said, I don't think that the power that's being proposed for municipalities is necessarily appropriate, and this wording really does need to be reworked. There are other approaches to the conversion and demolition of rental properties.

#### 1020

I believe one of my colleagues, Michael Bryant, the member from St Paul's, will be talking about this at great length. He will be sponsoring the bill from the city of Toronto, which has the endorsement of the council. In fact, every member of the Ontario Legislature has received a letter from the mayor of the city of Toronto, encouraging them and requesting them to support the private legislation giving the city of Toronto the authority to halt and delay conversion and demolition of very-much-needed rental accommodation.

By the way, this is in line with what Anne Golden said in her report. She was very specific. She said that cities ought to be able to have this kind of authority. What she said was, "There should be no loss of rental buildings." In fact, we've seen that consistently over the last couple

of years because of measures like Bill 96. This is Bill 30, a measure to correct that.

I have concerns, by the way, that this legislation does absolutely nothing to redress concerns around the Ontario Rental Housing Tribunal, which is just imposing a horrible burden on tenants, causing evictions at untold and unprecedented rates. I have of course proposed Bill 36, the Tenant Protection Amendment Act (Towards Fairness for Tenants), which contains six solid proposals to redress the imbalance in Bill 96 under the current tenant and landlord laws. The proposals have been very well-received. I encourage the member and the government to call the bill quickly for debate.

As I said, I will be supporting this bill. I hope to get it into committee so that we can make the appropriate amendments and make it a workable bill for the protection of rental housing.

**Mr Peter Kormos (Niagara Centre):** I stand to speak in support of this private member's bill and to commend Rosario Marchese, the member of Trinity-Spadina, for his lifelong passion and commitment to the issue of, among other things, affordable housing.

The Tories had better understand that there's a crisis here in the city of Toronto. In the two-year period between October 1997 through to October 1999, the average rent in the city increased by over \$1,000 a year—in fact, by \$1,128. The average rent on a downtown two-bedroom apartment is approximately \$1,200 a month.

If you use the standard of 30% of income to pay for housing—and when you're spending 30% of your income to pay for housing you've got precious little left for all those other sorts of things that you need to raise and maintain your family—you're talking about a yearly income of over \$46,000 being required to rent that two-bedroom downtown Toronto apartment at the average rent of around \$1,200 a month.

Mr Caplan is quite right. Ms Golden made it very clear that the city needs more affordable housing. That can't be disputed. There isn't a fair-minded, reasonable-thinking person who would dare suggest that that's not the case. This city, the city of Toronto, needs more affordable housing. It's a given. Anybody who suggests otherwise is either very naive or has motives that are suspect.

Ms Golden also warned that it's not only a matter of needing more affordable housing, but it's a matter of needing to preserve the existing stock of affordable housing, a stock that is rapidly being deteriorated and attacked by big-price developers, big-money people. We're not talking about small landlords who rent the upstairs of their two-storey home to students or to another senior. Please. We're talking about money here. With this government, money talks. With this government, money motivates legislation, because the fact is municipalities had the power, the city of Toronto had the power to protect its affordable housing stock, didn't it, until this government abandoned low- and middle-income tenants, betrayed them, threw them at the mercy

of the big-money developers with this legislation back in 1998.

I encourage members of this assembly to support this bill at second reading. I hear the concerns about some of the language used in the bill. Let's understand, this is not legislation that's being imposed upon municipalities; it's permissive. Municipalities "may" utilize this legislation. So for municipalities, if there are any, that don't suffer the crisis that the Tories have imposed upon affordable housing or within the area of affordable housing here in Toronto, if there are municipalities that don't have that crisis, the municipal council doesn't have to utilize these modest standards.

Clearly, condition number one is designed to have some mode of establishing what is affordable housing. It's a difficult thing to do without a complex formula. That's why it's important that this bill go to second reading—it's at second reading—and that it go to committee so that members of all three caucuses and the people they represent can come here to Queen's Park. And if committees ever travel again—it seems the only time committees travel under this government is when they think it's in their interest to try to get some local press, where there's been a paucity of positive news coverage of the Tory agenda. But if committees were ever to travel again so that people in communities across this province could make proposals—

**Ms Marilyn Mushinski (Scarborough Centre):** The pre-budget committee was in Niagara.

**Mr Kormos:** That's right. The pre-budget committee was down in Niagara and they got trashed. It may be a long time before they're back in Niagara—it was remarkable—where angels fear to tread.

But it remains that this should go to committee. Let's hear the criticism of it but let's also hear, as I'm sure we will, from those thousands upon thousands of hard-working, good families, families with kids, families who deserve decent, affordable housing, who have choices, as the Tory spokesperson says: the choice to either buy a high-priced, poorly constructed condo or live on the street. That's the choice this Conservative government gives those families. Mr Marchese wants to give them one other choice: affordable, decent housing for them and their families.

**Ms Mushinski:** I rise in the House today to speak, obviously, against Bill 30 introduced by the member for Trinity-Spadina. We all know that the intentions of the member for Trinity-Spadina are noble, as always. It's his actions, however, that are misguided, as usual.

As a member from an urban riding, I'm quite aware of the difficulties that many people face in finding affordable rental housing. In fact, approximately 40% of the constituents in my riding rent one form of housing or another. Over my 17 years as an elected official, I've heard my share of horror stories about the rental housing market.

My concern with this bill stems from the third party's and the opposition's refusal to address the root problems of affordable housing. For years there was a lack of new



rental housing developments in the city of Toronto. It was not profitable for developers and landlords to invest in new, high-density housing. Few units were being built and little was reinvested to repair and maintain existing units. Our stock of rental housing was crumbling; many units lacked proper utilities or were home to more insects and rodents than humans. In fact, under the old Liberal regime, rental housing starts fell 21.4%. With Mr Marchese's NDP government behind the wheel—in fact, some would say they were drunk behind the wheel—it was even worse. Rental housing starts plummeted by an outrageous 74.4%.

1030

We had to take steps to encourage the creation of new housing stock.

The first step was to create incentives for landlords to create new housing and better maintain the existing stock while still protecting tenants. That is why our government created the Tenant Protection Act. We recognized that the course previous governments had taken would only lead to a greater crisis in the housing market, and indeed it did.

In my riding of Scarborough Centre alone, over 8,000 new housing units have been constructed since 1995. Many of these units are privately owned condominium units, over 50% of which are sublet by their owners as rental apartment housing. In fact, plans for a development of several hundred units just a mere block away from my small suburban townhouse have been dusted off after a decade. Under the Mike Harris government, rental housing starts have increased by 100% and total housing starts have increased by 50%.

The second step we took was to help create an economic environment that would make investment in housing more attractive and that would make it possible for more people to afford better housing.

This was aided by our government's recognition that another factor in the housing market is take-home pay. A key component of the Common Sense Revolution was the recognition that hard-working taxpayers deserved to keep more of the money they earn. By cutting provincial taxes, we put more money into the pockets of Ontarians. This has helped lead to the creation of 610,000 net new jobs. Compare that to a loss of 10,000 jobs over the disastrous five-year period of Mr Marchese's government.

It was clear that we could not continue to travel down the path of previous governments. With the economy, health care, education, welfare and justice, we refused to follow the impotence of the Liberal and NDP governments and their experiments with public housing.

As an interesting aside, I read an article in *NOW* magazine a few months ago—and for those of you who don't know, *NOW* is renowned as a socialist bible—that the publicly owned Metropolitan Toronto Housing Authority is the landlord that is most likely to evict a tenant in Toronto. As a government, we have built an atmosphere that has created more new housing than either of those

two governments and one that has resulted in a great reinvestment in our housing stock.

We must continue to make bold and innovative decisions when dealing with our housing stock and refuse to go back to the old, worn-out concepts of the NDP government. Their housing plan has proven to be a failure, much like their justice plan and their deficit plan. I could go on, but I'll spare you the gruesome details.

This bill would only serve to reinforce the NDP's reputation as the Titanic of Ontario politics.

**Mr Michael Bryant (St Paul's):** I support this bill because I support anything that will improve the disastrous black hole, legislatively, that is the Tenant Protection Act.

When this government came in and brought that act in, it undid 15 years of legislative efforts by the Bill Davis government, the Peterson government and the Rae government to build up tenant rights. We all understood in this province that housing isn't a commodity that—we're not talking within the free market that you can give and take and trade as if it is a level playing field. When the vacancy rate is very low, as it is in the city of Toronto right now, it's a monopoly for the landlords, and in the midst of that monopoly it's the government's responsibility to provide some legislative redress to help tenants. Sixty-eight per cent of the people who live in my riding are tenants. It's an urban riding. It's a midtown riding. For them, housing is not a commodity, it's part of living in the city. Not everybody can afford a house. Of course, there's simply no way that all 68% of St Paul's residents who now rent could own property. This is part of the urban reality.

So what do you do? You try to come up with legislative solutions for the problem. I have a solution and it's a private bill. It's a private bill that has been supported by city council. They are drafting it as we speak. It's supported by the mayor of Toronto. A letter of support has gone out to every MPP in this House. I would hope it's supported by the New Democratic Party as well. It will be introduced. I have to tell you it's not a partisan bill. It's a very constructive solution to try to correct this monopoly that exists. It basically gives back to cities powers to control their own housing stock. Let cities, in this case the city of Toronto, decide the criteria by which demolition takes place.

The Ontario Municipal Board found that in fact rental stock is going down in this province and that the vacancy rate in Toronto is less than 1%. They found that in a decision in which their hands were tied by legislation. I don't know if I agree with the decision, but they said their hands were tied by legislation and they permitted the demolition of affordable housing in my riding on Tweedsmuir: Two buildings full of seniors, elderly people, many of whom have lived there for 25 years are now being thrown out into the streets. Into what market? A market where the vacancy rate is less than 1%. We need to stop demolitions and condo conversions in Toronto, and in Ontario we need to give to cities the power to make that decision.

The housing critic, Mr Caplan, and I announced outside of Tweedsmuir last fall, long before this private member's bill was introduced, that we ought to bring this private bill in. It received the support of city council in November, before this private member's bill was introduced. I look forward to introducing this private bill that I'm speaking of in this session, provided that the city gets the bill drafted and passed in time.

Again, it's a constructive solution. I support this bill and I hope that I can count on NDP support for my private bill, because we have to fix this disaster, this absolute disaster that has been created in Ontario through the Tenant Protection Act. We have to take this I guess neo-conservative experiment that was the Tenant Protection Act and correct it, and the way to do it is to support this bill, yes, but also we need to support the non-partisan bill that has the support of the mayor of the city of Toronto to make sure that in fact we correct the housing disaster in Ontario.

**The Acting Speaker (Mr Michael A. Brown):** Further debate?

**Mr Marchese:** Just a couple of things—and there's so much to say. The member for Scarborough Centre said so much and I'll do my best to respond to it in the time that I've got.

I hate to remind some of my Liberal friends who were not here that when we introduced the Rent Control Act the Liberals opposed it. Now, of course, in opposition they're saying, "We need rent control." While in opposition they said, "We need real rent control, meaningful rent control." They try to weasel with words about our rent control not being right, but they would find the right one and meaningful rent control. God bless. We tried to do the right thing in 1990 because we saw skyrocketing rent increases that people could not afford. The recession came and we tried to protect those who could least defend themselves in a recession. God knows what would have happened if the Tories had been in then. That's what we tried to do. You came into power with your own mandate and you got rid of rent control and introduced the tenant protection package. Poor tenants, if only they knew. They're getting to understand that that Tenant Protection Act, previously the tenant protection package, had nothing to do with them. It was a way of lulling tenants to sleep. If they only knew what was contained in the bill, they would have woke up with rage. But if you title a bill the Tenant Protection Act, you can simply say to tenants, "Don't worry your little heads, this bill is for you," until you face the situation where you are in court trying to deal with above-guideline increases to the rent. All of a sudden you say, "My God, when did this happen?" My only hope is that tenants will wake up.

1040

This bill is not just for Toronto. The Liberal member says, "I hope the NDP will support our non-partisan motion, which is for Toronto." Why wouldn't I support that bill? But when the two of you speak as if this bill doesn't quite do it but yours does, I have to tell you it makes me a little ill. My bill is intended to solve it for

cities across our beloved Ontario, including the city I have lived in most of my life—in fact, this very riding that I live in and represent. Why wouldn't I support such a bill?

I say to my Liberal colleagues that this bill gives power to all cities, to all municipalities of 25,000 and up, to determine for themselves, if certain conditions are met, that some rental buildings will not be torn down. What is wrong with such a power, I ask, member for Scarborough Centre?

**Interjection:** They're not torn down unless there's replacement stock.

**Mr Marchese:** I read the conditions. I'd hate to read them again. I think they are quite clear. You have it in front of you. Please read it. It is an enabling power to municipalities to keep affordable housing stock. There are conditions attached to it where cities could say: "That's fine, you can probably take it down. It's crumbling." Of course no one is going to say, "Keep it up." That is one of the conditions we stipulate.

What is wrong, member for Scarborough Centre—you as a former city councillor—with giving municipalities that power? Haven't you and others before advocated that cities are quite properly situated to defend the interests of the population, particularly as it relates to issues of this sort? It's a minor issue. I'm not asking you to change your bill, because I know you are hell-bent on keeping it. I know that. Why would I ask you to make changes that you will not make? This is something you can do and live with.

The member for Scarborough Centre mentions many things that are wild. I'm not sure who read those supposed statistical facts for you, but you're quite wrong. I'm going to try to read them into the record for you so that you know. In 1995—this is Professor Hulchanski, who has done a great deal of work in this area.

**Ms Mushinski:** I know who he is.

**Mr Marchese:** I'm sure you do.

In 1995, the Ontario government told us that the private sector would build the rental housing we need. Private sector rental housing starts in Ontario averaged 857 units per year for the four years 1995 to 1998, a small amount to address the high need. In the previous four years, 1991 to 1994, the period New Democrats were in, the average number built per year was 2,768. These are the facts. But you said our starts were much lower. I don't understand who wrote that paper for you, but you've got to get that research person out, and quickly, because they are wrong.

I'm not sure how you can challenge these figures of Professor Hulchanski. Maybe you have a another professor emeritus for everything in your caucus who compiles them on the fly. It's quite possible, Speaker.

**Mr Kormos:** The Tories don't read non-fiction.

**Mr Marchese:** The Tories don't read non-fiction? The number of private sector rental starts was even higher in the years prior to 1991, meaning that under the Liberals we had a lot of rental housing starts. I wouldn't want to criticize the Liberals all the time. To give them



credit where credit is due, they built too. We built them to give people choices. The choice is not between homelessness and a nice, lovely condo by the waterfront. That's not the choice we want. The choice we want is affordable housing for people who only earn \$20,000 or \$30,000.

Just a few more facts, Member for Scarborough Centre: In the 1991 census, owners' average income was \$73,000 and renters' average income was \$38,000. In the 1996 census, owners' average income was \$74,000 and renters' average income was \$36,000. Do you have a sense of the problem and the scale of the problem we're speaking to?

The housing starts you speak of are the type of houses in the Woodbridge area and the ones you wanted to build in the Rouge area and the Oak Ridges moraine area. These are the housing starts you are building for people who have the money to afford houses, but for rental accommodation—

#### *Interjection.*

**Mr Marchese:** I hope you will have an opportunity to speak again, Member Mushinski. It would be so nice to hear you.

The people who have the bucks can afford houses. Rental accommodation, the ones we're not building, the ones your buddies are not building—they've got nowhere to go.

Another study, Madame Mushinski from Scarborough Centre, since you spoke to this: Over 300,000 tenant households in Ontario are paying more than 50% of their income on rent. Many tenants are at immediate risk of becoming homeless. In most parts of Ontario, tenant incomes are falling even as rents rise faster than inflation.

We have a crisis. How can you deny we have a serious problem on our hands? How can you? Study after study shows we have a disaster. We've got the disaster relief fund people in Toronto saying: "We've got a problem. We need a 1% solution, where all governments commit themselves to 1% more to deal with the homelessness and the housing disaster we've got."

We've got people like Paul York from the Greater Toronto Tenants' Association and Mr MacIntyre from the Federation of Metro Tenants' Associations, who are here, working diligently to help tenants with the disaster you have caused. We've got people like Councillor Joe Mihevc, who says:

"In my ward, Ward 28, the residents of 310 and 320 Tweedsmuir Avenue are facing relocation because the Ontario Municipal Board has allowed Goldlist Properties to demolish these buildings to build condominiums. While the Ontario Municipal Board has ordered Goldlist to give the right of first refusal to the existing tenants, the replacement is only 60% of the units that are being lost."

The reality is that we're losing the very little we can control. What this bill attempts to do is give municipalities the trust you normally want to give them and the enabling power to control the little they can. Madame Mushinski, that's all I ask for. You were a municipal councillor. It's a short little bill and it does so very little, nothing that you can oppose.

**Mr Joseph N. Tascona (Barrie-Simcoe-Bradford):** I'm certainly pleased to join the debate with respect to Bill 30, brought forth by Mr Marchese.

I'm not in favour of this piece of legislation, being a member from outside Toronto. Certainly, the Toronto MPPs want to impose their own solution on the rest of the province. It's sort of typical, and perhaps a little arrogant. What we're dealing with here is Toronto MPPs who want to wrest powers from their municipalities. It's a municipal situation that they have to deal with. We're talking about branding the situation and saying, "Any municipality over 25,000 has to do this."

I can tell you that I haven't heard any concerns. My area is the fastest growing in the province. When I was on council, we mandated that affordable housing would be put forth. That's why we have tremendous growth and people moving from Toronto. They're moving from Toronto not because of rents; they're moving from Toronto because Toronto has a very expensive real estate market. They're coming to areas where housing is affordable. One reason why I left Toronto was because I couldn't afford a house in Toronto, so I moved to an area where there was affordable housing.

#### **1050**

What we have here is typical: a Toronto MPP saying, "I've got a solution for the rest of the province, because I don't trust my municipality to handle our own planning powers." A Toronto MPP problem, real or imagined, isn't something that should be imposed on the rest of the province.

We understand the direct connection between new housing starts and the Ontario rental housing market. In 1999, there were 67,235 new housing starts in Ontario, whereas the construction of rental housing in Ontario has languished for years. Everybody knows that. In part, this was due to the previous legislation that contained numerous obstacles to investing in the rental housing market.

I really question whether this legislation would even survive a charter challenge. What are you trying to do, tell people who own buildings, "You can't do anything with your building"? There are property rights that are enshrined under the charter, but the member from Toronto says: "Who cares? Let's put our solution on the rest of the province. We don't care whether people who own property have rights. We're going to interfere with their property rights." He knows well, with respect to condo conversions and the demolition of apartment units, that there are protections in place, many protections for tenants that deal with issue already.

I would say this to the member: A landlord must be allowed to decide whether or not the cost of maintaining an older building is so high that it no longer makes financial sense to do so. This member says, "I don't want them to be able to make that decision," because he's so anti-people who own property, and he's anti the rest of the province because he thinks he knows the solution for the rest of the province—and you don't.

**Mr George Smitherman (Toronto Centre-Rosedale):** It's a great pleasure to follow the member from north of Toronto and his Toronto-bashing antics. I stand

proudly before you as an MPP for the riding with the highest percentage of tenants and I stand before you as a homeowner.

I must say that this issue is one for which I am very pleased to lend support to the member for Trinity Spadina.

We hear from this government statistic after statistic about economic performance, but we hear nothing with respect to the housing needs of those people who are not getting the full benefit of economic expansion in Ontario, and that's what this is about. We hear nothing about trying to find and help to house and maintain housing for those who are the working poor. We hear nothing from this government about solutions to deal with the pressing problem of the homeless on our city streets. We hear nothing from this government about the extraordinary doubling of the child poverty rate since they have taken power. That is because they are awfully prepared as a government to create ghettos of poor people, to allow people to languish in poverty without any solution from this government. This government is ignorant, and they choose to bury their heads in the sand and to ignore the crisis.

In my riding, in the last little while, we've brought heritage buildings that had been boarded up, that had been bricked in, back to life. We did that, not through the support of this government, but through the support of the federal government and their residential rehabilitation assistance program. Now 88 Carlton Street, which was once home to squatters, is finding new life as decent, affordable housing for people. Similarly, a building on Jarvis Street, just south of Maitland, is now undergoing the final stages of renovation, and that heritage property is being brought back to life and providing homes for people.

We hear this government constantly on the case of co-ops, hammering co-ops as bad investments by the public. My riding is home to more co-ops than any other in the country. I'll take members on walking tours and demonstrate to them not only that this is good housing but that this is housing that contributes to good communities.

Similarly, my riding is also going through an evolution of new condominiums, more condominium development than you can imagine: 15 condominium developments in Yorkville alone. I'm particularly proud of the new life of condominiums that we see down at the corner of King and Parliament, where the enlightened policies of Barbara Hall, the former mayor, led to zoning certainty which has led to the development of new housing.

With respect to the demolition of presently occupied tenant housing, this is not just an issue that takes place in the big-scale developments like Tweedsmuir that my colleague from St Paul's spoke about. This is happening, regrettably, in too many other places as well. In Rosedale, on Maple Avenue, we've got a situation where a large house that had been subdivided into 12 is presently undergoing a renovation and will be sold as three condominium units, yet again evidence of the failed policies

on the part of this government to protect the housing stock that we have.

Why would we ask that they protect the housing stock that we have? It is simple: Because we have a housing crisis in the city of Toronto. It is not a crisis that will be solved by the creation of more condominiums, which I embrace. It is that this government fails to recognize the extent to which there are people at the bottom end, more marginal people, poorer people, the working poor, those living on welfare, those living on disability, who require some assistance from government. In this case, we're asking this government to recognize that it has a choice, that it has a policy tool at its disposal, and that is to say, as we said as a government in the 1980s, "We will not allow rental housing to be torn down and to exacerbate the crisis in Ontario."

**The Acting Speaker:** The member for Trinity Spadina has two minutes to conclude.

**Mr Marchese:** Just a reminder to the member for Barrie-Simcoe-Bradford: I think he needs to read the bill. It's not terribly complicated; it's quite simple. It says: "The council of a local municipality having a population of 25,000 or more may, by bylaw, prohibit the demolition of rental properties ... unless one of the following conditions is fulfilled," and there are four conditions. Quickly, "unless ... All or part of the rental property is, in the opinion of the municipality's chief building official, structurally unsound," is one example, and there are three others. These are not terribly complicated, and it gives municipalities a great deal of flexibility to deal with some of these problems. It's only a small part of what municipalities can do to control their housing stock, that's all. Give municipalities the power to do that.

This problem is province-wide. It isn't Toronto alone that's suffering this. We're suffering this problem across Ontario, and studies have shown this. You cannot be blind to them. You cannot deny them.

The Canadian Mortgage and Housing Corp said we will have needed 80,000 units to be built by 2001. We're in the year 2000 and we've only built 6,000 units. We have a problem, and it's a crisis. Unless we do something, the crisis will deepen. This motion attempts in a small way to deal with that. It doesn't deal with all of the problems. It doesn't even contradict your bill. It does not go against your Tenant Protection Act, I would argue. It's something you can encompass, unlike so many other things that I could bring forward that I know you will object to and not support. This is something that I urge you to support, because it is in your interests as well.

## GERMAN PIONEERS DAY ACT, 1999

### LOI DE 1999 SUR LE JOUR DES PIONNIERS ALLEMANDS

Mr Wettlaufer moved second reading of the following bill:

Bill 28, An Act to proclaim German Pioneers Day /  
Projet de loi 28, Loi proclamant le Jour des pionniers  
allemands.



**Mr Wayne Wettlaufer (Kitchener Centre):** On July 24, 1788, King George III, by royal proclamation, formed several districts within the then province of Quebec, west of the Ottawa River, now known as Ontario. Those districts are Luneberg, bounded on the east by the Lancaster tract and on the west by the Gananoque River, including such towns as Charlottenburg, Cornwall, Osnabruk, Williamsburg, Matilda, Edwardsburg, Augusta and Elizabeth-Town; the second district was Mecklenburg, from the western boundary of Luneberg to the Trent River, comprehending such towns as Pittsburg, Kingston, Ernest-Town, Fredericksburg, Adolphus-Town, Marysburg, Sophiasburg, Ameliasburg, Sydney, Thurlow, Richmond and Camden; the third district was Nassau, bounded by Mecklenburg on the east and aligned north from Long Point; and the fourth district was Hesse, which encompassed the remainder of the province. These districts recognized the then large population of German settlers in Ontario.

There have been various waves of German immigration to Ontario—seven, to be factual. Some accounts indicate three major waves of immigration, but in total there were seven. The first, of course, was immediately after the American Revolutionary War. Over 24,000 German troops fought for the British in the American Revolutionary War because the British didn't have enough troops. After the war some of those troops came to Canada to stay, most of whom came to Ontario as part of the United Empire Loyalist mass settlement.

**1100**

The United Empire Loyalist definition includes three classes of settlers: a nobler class, those forced from the United States by persecution during and after the revolutionary war and, lastly, disbanded troops. It is estimated that as many as 10,000 of those troops came to Ontario to stay. Unfortunately the figure is unverifiable, because in 1799 then Lieutenant Governor General Peter Hunter struck their names from the list of United Empire Loyalists because they did not reflect a British connection. After the war some of those troops continued to serve the British government as spies.

During and after the war many settlers loyal to the crown, from Pennsylvania, New York and as far south as Georgia, immigrated to Ontario searching for peace and arable land, and by 1821 the population had grown to 125,000 citizens, of which 70% were German. As many as 25% were German in the eastern parts of this province. By 1821 they were coming not only from the United States—Georgia, Pennsylvania, New York—but they were also coming from Prussia, they were coming from Hesse, they were coming from Saxony. My own ancestors, the Wettlaufers, at that time came from Alsfeld, Hesse.

We have a page here by the name of Alison Brohman from my riding of Kitchener Centre. Alison's family also came from Hesse. Frank Klees, the government whip, is a German Canadian. We also have other descendants of German Canadians in this caucus and in this House.

The very first church in Ontario was built by a German Canadian. The first Lutheran minister was

Johann Samuel Schwerdtfeger, who has been described as the saint of the St Lawrence Seaway and served the congregations of Williamsburg, Matilda and Osnabruk. Minister Schwerdtfeger had been a pastor of congregations in Pennsylvania, Maryland and New York but was persecuted because of his allegiance to the crown during the American Revolution. He moved to Canada in 1791. After his death in 1798, his son requested that his name be added to the list of United Empire Loyalists, but the reviewing committee did not recommend it because he had never joined the Royal Standard, ie, he was not a member of the nobility. However, his name was put on the list and beside it is the note "much persecuted." Both Julia Munro of our caucus and Norm Sterling, our House leader, are descendants of the Reverend Schwerdtfeger.

A few years later German Lutheran churches were established in Ernestown, Fredericksburg and Camden East, but there were laws passed some time later and prior to the Family Compact to discourage group settlement of Germans because it was felt at that time that they could no longer be easily assimilated if they were in groups. John Graves Simcoe, who had initially attracted German settlement, discouraged group settlement and he then also changed the names of the districts which had been proclaimed by King George III to reflect a British connection. German place names abound in this province. We have all kinds in Waterloo region, but they abound elsewhere, not just in Waterloo region.

The German settlers and their descendants have given us much in this province, not only the Amish and the Mennonite but also other German artisans and German farmers.

What have the Germans given us? Well, they gave us the Christmas tree. They gave us the Easter bunny and Easter eggs; that came from the German settlers. They gave us kindergarten. They gave us J.M. Schneider meats. Their descendants gave us a Canadian furniture industry that had no equal elsewhere in the world, noted for its fine craftsmanship, names such as Krug Furniture, Kaufman Furniture, Baetz Furniture, Knechtel Furniture and the old Hespeler Furniture. They gave us Zehrs, a very successful food chain, which is now owned by Galen Weston. They gave us the famous Kraut line of the Boston Bruins in the 1940s and 1950s. One of them was Milt Schmidt, who grew up across the street from my own father. They gave us Bauer skates, Greb shoes, Dare biscuits—Dare was then spelled Doerr. They gave us Economical Mutual Insurance Co, one of the largest property and casualty insurance companies in Canada. They gave us Clarica, which was then Mutual Life Assurance Co. Sir Adam Beck, the father of Ontario Hydro, was a German Canadian. John Diefenbaker was descended from German stock. Ed Schreyer, former Governor General of Canada, was of German stock. Louis Breithaupt, a former Lieutenant Governor of Ontario, was also of German stock.

It has touched all three political parties. Theodore Heintzman gave us the best pianos ever made in Canada. Daniel Deitweiler was the driving force behind the

Queenston-Chippewa canal. He founded the Algoma Power Co, whose idea it was to improve the St Lawrence Seaway. He also founded the great Waterway Association of Canada, the Welland canal locks; it was his idea that gave us the Welland canal, Mr Kormos. Elias W.B. Schneider improved the flour-milling process. Reinhold Lang gave us one of the finest leather-tanning processes ever known. Augustus Stephen Vogt was a gifted musician who founded the Toronto Mendelssohn Choir. William Moll-Berczy, born Johann Albrecht Ulrich Moll-Berczy, is best known for his portrait of Joseph Brant, but he was the artist who built Yonge Street and Markham Road. Karl Ahrens is an artist whose work hangs in the National Art Gallery. The riding of Waterloo North, which preceded mine, was represented by German Canadians both provincially and federally. Isaac Erb Bowman, Hugo Kranz, W.G. (Mike) Weichel, W.D. Euler, L.O. Breithaupt, Albert Smith—the list goes on and on, famous German descendants who have given Ontario much.

**Mr James J. Bradley (St Catharines):** I'm pleased to join in the debate today on this particular matter, which is brought by Mr Wettlaufer, the member for Kitchener Centre, An Act to proclaim German Pioneers Day, 1999. It is listed as officially in the order papers of this assembly.

One of the features of this country and indeed of this province is the fact that we have people of so many different ethnic backgrounds who have made a contribution. We think of the early days. We had the First Nations people in this country and then we had explorers coming over from Europe, and one might have anticipated that perhaps the country would be a French or English country entirely because of the early settlements that took place. But we in Canada made a decision many years ago to welcome people of all backgrounds, and our country is obviously richer as a result.

When you think of it in perhaps crass economic terms, for instance, we have people who can communicate in their own native language with places all over this world, who have connections with countries all over this world, who understand people from various ethnic backgrounds all over this world. That mosaic we have in Canada is a genuine advantage to this country. Make no mistake about it. Certainly among those individuals have been people who have come from Germany to North America as Germans and then came to Canada—I think of the United States and then coming to Canada—and have made a very significant contribution to our country.

The member for Kitchener Centre may know that in the Niagara Peninsula we have many people of German descent. You mentioned Mennonite people, who make a wonderful contribution to our communities in terms of the churches we have in our area, in terms of the charitable work which is done, not only in our part of the province but people who have gone around the world to offer their services to others.

1110

In St Catharines we have—and we're very proud of it—Club Heidelberg. There's Club Rheingold in Port

Colborne. Both of these are areas where people of German descent gather and have membership in, but I can tell you that they welcome people from across the Niagara Peninsula and beyond our borders to their various events and to share in that culture, and this is a distinct advantage.

Club Heidelberg in St Catharines, if I may be parochial, has provided recreational facilities, a wonderful hall for people. We have what's called the Folk Arts Festival, this year from May 20 to June 4, where people of various ethnic backgrounds get together. You know, when you see people fighting around the world, you ask them to come to our communities, which have these kinds of festivals. Among the organizations and groups which are welcoming people to their facilities and being an important part are the people of Club Heidelberg in our area and Club Rheingold in Port Colborne. I've enjoyed many an anniversary at Club Heidelberg over the years, enjoyed the dancing. I can't do it, I can tell you that, but the dancing is just outstanding. The musical talent is outstanding. The crafts, the art, the food, the warm hospitality which is extended to people of our community by people of German background is simply wonderful, and our community is richer in a cultural sense because of that.

The member wouldn't mind me mentioning, I know, while we're on this subject, the assessment that might be changed for various halls. I'm worried that Club Heidelberg, for instance, as a result of new provincial rules in assessment, may have an assessment two and a half times what it is today. I know the member for Kitchener Centre and I will be advocating—and I see another member in the House today, Mr Kormos, who has been on this issue as well. We discussed it together at a meeting the other day at the region. We want to see these clubs maintained.

One of the challenges is that the flow of immigration from countries such as Germany has slowed to a certain extent. We'd like to see more people coming from all over the world to our communities. This slowed down, so we see an organization which has many seniors who are still very active and are looking for the younger people within their community to continue to make that contribution. In order to do so, the halls must be treated fairly in terms of assessment. I hope we revert back to the residential assessment which has been applied to them instead of the commercial assessment, which would raise their assessment two and a half times.

I don't want to divert too far into that, but it's important. I think the member would understand that and know how important it is to maintain the halls, the home where people can come as an organization and again share with those of us in the communities.

We have many people of German descent at Tabor Manor in St Catharines, which is a wonderful nursing home and seniors' home in St Catharines. There is Heidehof, which is a right across the street from Club Heidelberg. Again, there are many people of German background there. Right next to Club Heidelberg, we



have some new apartments now where many people of German descent have moved in. I can relate to what the member is talking about. I know the Kitchener-Waterloo area and the wonderful contribution that people of German descent have made to that area. I know the great history and the fun that is associated with Oktoberfest. I've had people from the Niagara Peninsula and I have relatives who have gone to Oktoberfest. They enjoy it immensely and again enjoy the warm hospitality of people of German background.

We see a lot of our history as well. Mennonite people have preserved it, but you have the Amish, particularly in the area of Kitchener-Waterloo, who, if we look at the way of life, have continued that way of life which started a number of years ago and give us some insight into our early history, particularly as it relates to farming in that particular area.

I'm pleased to join with the member in indicating my support for this bill.

I want to say as well that I had the pleasure of meeting Milt Schmidt, one of the Kraut line. He used to play for the Boston Bruins, and what a gentleman. I met him at a recent event. I have to be careful of what I say, but today, professional athletes, with all of the money they have and the star-studded cast they hang around with, don't often relate to average people as well as people of years ago. What a gentlemen Mr Milt Schmidt was. I approached him at a table he was sitting at, and he thanked me at the end for coming to over to speak to him. I recalled that I had him in hockey cards when I was a little kid, and he was quite intrigued with that.

**Mr Marcel Beaubien (Lambton-Kent-Middlesex):**—pretty young in those days.

**Mr Bradley:** Yes. I accept the interjection beside me.

So I want to say that I understand the member is bringing forward this resolution particularly looking at his area. I'm glad that he brought forward this bill which emphasizes the contribution of people of German background to the province of Ontario, to the country of Canada, and in particular to his community. Thank you for doing it, member for Kitchener Centre, and I suspect that we're going to have unanimous support for your bill.

**Mr Peter Kormos (Niagara Centre):** I'll support any effort—any effort, any legislation, any cause—that helps us to celebrate the incredibly rich cultural and ethnic diversity of this great country. I say to the author of this bill, you went through a list of historical events and personalities. By the time you got to the Easter egg, you had me sold. You need only have mentioned rouladen, though, and I would have bought into this legislation in a minute. My people, perhaps far more modestly, my Slovak Canadian parents, brought perogies and holubsti, competitors perhaps with rouladen.

I appreciate your narration of the history of their role in the colonial territories prior to the formation of Canada. In the area I come from, Niagara region, again, there is a great tradition of the United Empire Loyalists, among them Pennsylvania Dutch, the very same people you were speaking of, those Germans who were

participants in the American Revolution, who either returned immediately or came immediately to what is now Canada, Upper and Lower Canada, or who stayed in the United States for some period of time and then came here.

But I have to tell you, the German Canadians that I'm most familiar with, of course, are not the personalities you spoke of, the wealthy or the famous, are not the heroes of revolutionary wars, if there are ever any real heroes in wartime, as compared to people who merely do what they've got to do. My greatest familiarity, because of my age, because of when I was born and when I grew up and where I grew up, is with that wave of Germans that came here in that tragic period, of course, in the late 1940s and early 1950s. I know these people. While among them I'm sure there are some who have made the Canadian Who's Who, the vast majority of them, like the vast majority of my family and myself and people from my cultural background and most cultural backgrounds, aren't in Who's Who. But they're decent, hard-working people.

I tell you, those German Canadians who came here after the horrible experience of the war are as much Canadian pioneers as were those Germans or Prussians of the 18th or 19th centuries, because they worked hard. They worked at incredibly low wages. They sacrificed. They had but one passion, and that was to make life better for their children than it was for them. To achieve that goal, they sacrificed and they made commitments that they stuck to, and they built things. They built their homes. They didn't hire contractors; they built their homes. I know these people. I witnessed this as a kid. They didn't hire excavators to dig basements; they dug basements with shovels. Women worked alongside their husbands, working as hard and, importantly, probably working longer because they not only worked alongside their husbands but raised their children and maintained their households as well.

1120

So I understand your interest in reciting the names of famous or celebrated German Canadians, but let my modest contribution to this debate be a celebration of the German Canadians, like so many other new Canadians, who may never have made headlines, who may never have become mega-wealthy but, by God, who contributed as much to this country as any big entrepreneur, as any inventor, as any scientist, as any celebrity, as any revolutionary war survivor or hero.

These are the kinds of folks that I meet. Jim Bradley spoke of Club Heidelberg and Club Rheingold, and I suspect these are some of your constituents here from the German Canadian community. You know the communities we're talking about when Jim Bradley and I talk about Niagara region and Heidelberg and Club Rheingold. I know these people. I grew up with them and I grew up with their kids. I knew them when they first came to this country in that huge wave of post-war immigration, and I watched them build. They not only built homes, but they built neighbourhoods, they built

communities, they built schools and they built hospitals. They, with great sacrifice, built things like public health care systems so that their kids wouldn't have to suffer in a user-pay, private sector health care system, so that their kids and grandkids could get medical treatment regardless of how much money they had in their hip pocket. So many of them were denied opportunities, because they came not just from big cities but from small towns, peasant towns, in Germany. They didn't have the opportunity of even high school education, never mind, my goodness, college or university. But they made sure their kids and their grandkids had college and university educations. They did it by giving more than they ever took back.

So I join you in this bill. Today we talk about German Canadians and their great contribution to Canada historically, but I'll put this to you, even more importantly, currently. I want to join with anybody who wants to reinforce and assist these cultural communities, as Canadian as any community could be. Let's confront that right now. I have no hesitation—and I challenge anybody who suggests that any person who maintains regard and respect for their cultural heritage is somehow a lesser Canadian. On the contrary, Canada, as a country of immigrants, is stronger by virtue of our insistence that we reinforce our history of multiculturalism and multi-ethnicity.

I meet on a monthly basis, if not more frequently, with new Canadian families who come to the Niagara region, who get involved with the Welland Heritage Council and the multicultural centre, where English as a second language is taught, amongst other things. I encourage those families and tell them: "Please, make sure your kids learn their mother tongue, because, don't worry, they're going to learn English. Trust me. They're going to learn English, not because of you but in spite of you. They're going to learn it from the television, from the radio, from pop music, from the schoolyard, from any other number of sources." Don't worry, new Canadians, about your kids learning English. They're going to learn English. Please, make sure they learn their mother tongue. Don't worry about them not becoming Canadianized. Your children will become Canadianized, I assure you of that.

You as new Canadians have a responsibility to make sure that your children understand their mother culture and those traditions that their parents, grandparents, great-grandparents and so many generations before them celebrated throughout the course of not just decades but centuries and in the case of so many cultures, millennia.

I applaud our ethnic and cultural communities that join together to struggle—because it is a struggle. As generations succeed each other and children marry and move away, it becomes more and more difficult, doesn't it, my friends? The membership in your associations, your German Canadian clubs, becomes a little smaller, and from time to time a little greyer. The number of people who are there to run the clubs and the organizations becomes fewer and fewer and older and older. We worry

about the survival of those ethnic cultural clubs. We worry about them because they are incredibly important to our communities. They add an incredible richness to our communities. So I will speak, as Mr Bradley did, about the crisis among our ethnic and cultural communities across Ontario right now.

I know that in Niagara region there are scores of ethnic cultural halls, non-profit organizations, which have been reclassified, for the purpose of tax assessment, into commercial properties. I understand and commercial hall operators, commercial caterers, understand that they always have been classified commercial. But please understand—and I've written to Ernie Eves, treasurer. I spoke with him just two days ago, Tuesday, about this. Jim Bradley and I met with our Tory counterparts, who weren't particularly helpful on the issue, in Niagara region. They weren't very helpful at all. We met with regional chair Debbie Zimmerman and her tax assessment advisory committee, and Jim and I made a plea for these cultural halls, these cultural communities.

You see, what's happening, whether it's the Slovak hall in Welland or the Casa Dante hall or Club Rheingold or the Ukrainian Cultural Centre or the Ukrainian Labour Temple—see, now I've started and I should finish them, shouldn't I? I'm going to offend somebody by omitting them, but they know who I'm talking about. These halls aren't going to survive this latest onslaught of double and triple property taxes. They are bona fide non-profit organizations. People had better understand that if our cultural halls, 99% of them non-profit, don't survive, when we go to these halls to arrange for wedding receptions for our children or for celebrations for our sports teams or for any number of events like that—if we didn't have these non-profit halls, we would be paying twice and three times what we pay now for our dinners and our celebrations, wouldn't we? You folks know it, because you and your memberships subsidize our family celebrations with your volunteer work. So communities better be very careful about forcing these cultural communities out of the hall business, and I say "business" in the loosest sense of the word.

It appears that the basis for the reclassification is a ministerial advisory, an interpretive bulletin to the now private, arms-length Ontario Property Assessment Corp, which specifically states that although non-profit halls are to be exempt from the commercial classification, "non-profit halls" does not include cultural and ethnic halls. That's nuts and it's stupid and I'm hoping that at this point it's a simple matter of having Mr Eves review the issue, because it's as simple as his ministry preparing yet another advisory memo, an interpretive memo to the Ontario Property Assessment Corp, to keep these non-profit—they are non-profit. They not only provide their services non-profit, but each and every one of them contributes incredible amounts of money on an annual basis to their community, not just their own ethnic community but the broader community, the community at large. The German Canadians, through their halls and their centres, do it, along with every other single ethnic group: the Italian Canadians, the Slovak Canadians, the



Ukrainian Canadians, the Franco-Canadians, the whole nine yards.

1130

If we're really serious about celebrating our cultural diversity and about paying homage to pioneers both historical and present—as I say, those great pioneers of this century, or the last one, as it is now, but those great pioneers of the last 50 years, those hard-working, decent people who worked and struggled in a new land, confronted by a new language, but who at the same time had the courage and the wisdom to maintain the presence of their culture in their families and in their new communities so that they could share it with their children and, more importantly, share it with the rest of us. That's what multiculturalism is all about. It's not about tolerating different cultures; it's about celebrating different cultures.

Club Rheingold is probably more important to me than it is to German Canadians because it lets me share and celebrate part of that tremendous and rich German culture. So it's far more important for me—I speak very selfishly now, I suppose—to ensure that Club Rheingold survives and its membership survives, because one way or another those families will maintain some essence of Germanic culture, but it will be harder for me to share it.

So I'll support this bill. Please, let's support these German Canadians and their other ethnic colleagues and contemporaries across this province.

**Mr Toby Barrett (Haldimand-Norfolk-Brant):** I'm pleased to rise today to support the member for Kitchener Centre in bringing forward this bill to recognize the contributions of German people to our history in Ontario. As the member has said, German immigrants began coming to Ontario in large numbers in the 18th century, and they helped settle this land and have made great contributions to the values and ideals of our communities.

I would also like to go down the road of history and just reinforce some of the things that have been said about German people in the past. Early German settlers to North America were often Mennonites with roots back to the radical wing of the 16th-century Protestant Reformation. Many of these German Mennonites had to flee Europe because of persecution in the 17th and 18th centuries, and a great number settled in Pennsylvania, as they were attracted to the area by the tolerant policies of William Penn's government. These settlers became known as Pennsylvania Deutsche or, after many years of mispronunciation, Pennsylvania Dutch. Their skills and those of German immigrants who followed them made for a very rich agricultural community.

By the time of the American Revolution, the Pennsylvania Deutsche population was about 100,000, more than a third of the state's population at that time. But many German settlers left Pennsylvania because of their opposition to the fervour of American nationalism. The American Revolution triggered great migration of United Empire Loyalists to Upper Canada, and of these immigrants Germans made up the largest group of non-

British descent, perhaps 10% to 20% of the refugees fleeing into Canada in the decade following 1776. Many of these immigrants settled in Upper Canada by acquiring land from private landowners in the Niagara Peninsula, as we've heard, York and Waterloo counties, Haldimand county, and throughout my riding of Haldimand-Norfolk-Brant.

I'm of United Empire Loyalist ancestry, primarily British but also Pennsylvania Deutsche through my great-great-grandmother Lang from Round Plains in Norfolk county. I would also like to remind the members of the House of United Empire Loyalist Day, which is coming up June 19.

The American Revolution also caused King George III of England to enlist the help of his German allies in attempting to defeat rebel forces. These men—as Mr Wettlaufer described earlier this morning, 24,000 or so Hessian soldiers were also brought in to fight the Americans—have also had a significant cultural and demographic effect on Canadian society. In fact, they represented 3% to 4% or 5% of Canada's entire male population in 1783. Many came from the United States to take advantage of the offer of land grants from Lieutenant Governor John Graves Simcoe to former soldiers of the King.

Late last year, the Delhi District German Home, located in my riding, celebrated its 50th anniversary. The German Home was founded by German people who came to Canada in the early to mid-1900s, mostly in the period following the First World War. Founders of this home were determined to keep German culture, traditions and language alive. They were involved in farming in our area and helped build our very strong agricultural and primarily tobacco-based economy. At the 50th anniversary of the German Home, I related to those present that this legislation was coming up and explained I would be supporting the legislation. I'm very pleased to be able to speak today in support of recognizing the immense contributions that German pioneers have made in strengthening our province.

**Mr Tony Ruprecht (Davenport):** I wish to congratulate the member for Kitchener Centre, Mr Wettlaufer, on this resolution, German Pioneer Day. I want to make my remarks based on a book called Toronto's Many Faces. The first recorded German settler in Canada was a man called Hans Bernard, who purchased land in 1664. Then, in the midst of the 18th century, 2,000 German newcomers landed at Halifax. From there, some of them went over to New Brunswick, which of course is really called Neu Braunschweig, and the Duke of Neu Braunschweig, or New Brunswick, was then related, of course, to the English crown. These early German-speaking immigrants to Canada came not only from the various estates of Germany, but they also came from the former Austro-Hungarian Empire and other European countries. After the American Revolution, German settlers from New York state, disbanded German auxiliary troops of the British crown and Mennonites, as

was mentioned earlier, the Pennsylvania Deutch, came in search of this land to Upper Canada.

Let's now look at what happened in Toronto specifically. Many of us probably don't know that the co-founder of the city of Toronto, a man called William Moll-Berczy, came to Toronto with 64 German families to co-found Toronto with Graves Simcoe, the governor at the time. In response to his request to get land, Graves Simcoe said, "Why don't you co-found Toronto with me and build Yonge Street from the foot of Lake Ontario all the way over to Lake Simcoe?" That, he and the 64 families proceeded to do, many of whom died in the process because York, the city of Toronto, that is, was known at that time as "Muddy York," meaning swamp-land and trees. That was the foundation of Toronto, basically, and that all had to be cleared. That's why many of them died in doing that job of building Yonge Street. Today there is a monument in front of the Hummingbird Centre commemorating that family's contribution and those German settlers, those 64 families, many of whom died in constructing Yonge Street.

By 1850, the Toronto community began to organize as a group. German Lutherans formed the congregation of the first Lutheran church of Toronto. German builders, architects, manufacturers and craftsmen started their own businesses, including Theodore Heintzman, who would turn his kitchen trade into Heintzman Co, a world-renowned manufacturer of pianos; Sir Adam Beck was knighted for establishing Toronto Hydro in 1903; and German musicians gave Toronto's early arts community a boost when Augustus Stephen Vogt formed the Mendelssohn Choir of Toronto in 1894; and Luigi Maria von Kunits revived the Toronto Symphony Orchestra in 1922.

Now, when we look at Toronto specifically, we see that the sleek black façade of the Toronto-Dominion Centre bears the famous markings of van der Rohe's international Bauhaus style, while architect Eberhart Zeidler's designs of top tourist attractions such as the Eaton Centre, Ontario Place and the Queen's Quay Terminal stand as silhouettes of Toronto's skyline. Their contribution, indeed, as we know, has been great, and we are very grateful for their contributions to not only Toronto but all of Canada. One would have to write another book to detail all these contributions.

1140

If there are visitors to Toronto, and I know there are many from Germany, and they say, "Where do I go to find German cultural attributes, or where do I find some places that still have a German connection?" I would point them first to Berczy Park, which is near the Hummingbird Centre. In fact, Berczy's son was the first president of Consumers' Gas of Toronto and was also a very famous artist and sculptor.

Then I would point them to the statue of Adam Beck, as I mentioned earlier. It's made of granite and it's pretty massive. Then I would say, "Go to Black Creek Pioneer Village." Many of us have been there. These buildings at Jane and Steeles are like an open-air museum and have

been arranged around the early 19th-century farm of the Pennsylvania German immigrant Daniel Stong. Then I would tell them, "Go see the Theodore Heintzman plaque." Finally, I would say to them, "Have you seen the German-Canadian Heritage Museum at 6650 Hurontario Street in Mississauga?" It's a half-hour drive from downtown Toronto on Highway 10 and it's situated in an historic farmhouse, the Hansa House, and it contains a wealth of information on German settlement and contributions to Ontario. Of course, there's also the German library, which is housed at the Goethe Institute on King Street West.

Finally, let me simply say this. I know that the member from Kitchener Centre has—

**Mr Bradley:** What book are you quoting from?

**Mr Ruprecht:** Thank you for mentioning this to me. But I am looking at the book which all members have a copy of. It may not be on your desks right now, but it's called Toronto's Many Faces. I'm happy to tell you now that we're doing the third edition this year. It's the bible of multiculturalism in Toronto. Everything is in it.

**Mr Bradley:** Who's the author?

**Mr Ruprecht:** The author is Tony Ruprecht, the member from Davenport. Anyway, I wish to congratulate the member, simply to say that the honourable James Breithaupt, whom he is very close to, had made a previous request, actually, to do a German Pioneers Day. I am very happy not only to support this particular resolution but also to say to the member that he has done fine work in continuing to maintain the culture and keeping it alive.

**Mr Ted Arnott (Waterloo-Wellington):** I wish I had a book to flog too, but I don't. However, I am very pleased to stand in my place today and support Bill 28, An Act to proclaim German Pioneers Day. I want to begin by commending my friend the member for Kitchener Centre for bringing this private member's bill forward and for the fine speech he gave us this morning.

I also want to add a word of welcome to the people from the Kitchener-Waterloo area who are here in the gallery in support of Mr Wettlaufer's private member's bill. I say welcome to you and I thank you for coming.

Members here know that I represent a large, diverse, rural riding called Waterloo-Wellington, which also includes a fairly substantial city component in the city of Kitchener. I also have Wellesley township, Woolwich township and Wilmot township in Waterloo region. I'm very privileged to represent a southwestern portion of the city of Kitchener.

I can credibly claim that, in terms of geography, I have the biggest part of the city of Kitchener, although not the biggest population. I'm privileged to share that honour with the member for Kitchener Centre who probably, in terms of the population of the city of Kitchener, has the biggest area. This member is hard-working and determined to provide a strong voice for his constituents, which he does with great tenacity. He has earned the respect of the members of the House and the respect and support of various German business and volunteer



organizations. He's without a doubt a the most appropriate member to bring this bill forward.

I was honoured last year to join for the first time the member for Kitchener Centre at the Oktoberfest in Kitchener as one of the MPPs representing part of the city of Kitchener at that festival. I'm proud to support the hundreds upon hundreds of volunteers who organize this largest celebration of its kind outside of Germany each year. I'm also proud to say that I have some German ancestry, some German blood. My great-great-grandfather's last name was Kramp. My wife's grandmother's maiden name was Hampel. We are very proud of our German ancestry and our German heritage.

I also share with Wayne a deep grasp of the importance of private members' time as a vehicle for members who are not part of the executive council to support efforts that are near and dear to their hearts. Sometimes it's important to note that it's the only venue for initiatives that MPPs have to bring ideas forward. Knowing that the member for Kitchener Centre realizes and appreciates this, I am very pleased to offer my brief remarks today in support of Bill 28.

I reiterate, this can be a forum for success. People often say that private members' bills don't always become law, but that's not always the case. I've been fortunate to have a number of my initiatives that have been brought forward as private member's bills adopted as perhaps government legislation or adopted in the form in which I've brought them forward. I've used this to support volunteer firefighters. I've used this vehicle to call upon the government to bring in a debt retirement plan. I've also brought forward an idea which helped ensure that volunteer firefighters would have adequate workers' compensation coverage, which was adopted by the government in the last Parliament, in 1998. Recently, my resolution for a full restoration of the Canada health and social transfer was acknowledged by the Premier and incorporated in part by the government in its recent resolution this week, and I look forward to seeking unanimous support for my own resolution next week in this House.

I believe that this bill, Bill 28, also warrants full support by the Legislature, and I'm sure the member so ably sponsoring it will carry it forward to its full implementation and intended effect.

By proclaiming a German Pioneers Day, we will keep alive values by celebrating the living history and present-day contributions of German people in the Waterloo-Wellington area and indeed across Ontario. We will honour the high value they placed upon freedom and opportunity by venturing forth to begin a new life in Canada. We will help maintain the spirit that helped build the society we have, and are so fortunate to have, and in so doing, further enhance the future for all Ontario residents.

Again I thank the member for Kitchener Centre for sponsoring this bill and bringing it forward, and I'm very grateful for the opportunity to speak in favour of it. I hope all members will support this important initiative today.

**The Acting Speaker (Mr Michael A. Brown):** Further debate? The member for Dufferin-Peel-Wellington-Grey.

**Mr David Tilson (Dufferin-Peel-Wellington-Grey):** Well said, Mr Speaker.

I would like to join in the debate to support my friend from Kitchener Centre, Wayne Wettlaufer, on his private member's bill, Bill 28, An Act to proclaim German Pioneers Day.

I have known this member since he was first elected in 1995. Certainly in this House and in caucus meetings he is most proud of his German heritage. I'm pleased that he has brought this legislation forward, which is legislation to celebrate, with the people of German descent and German heritage, the great Canadian-German history in this province.

I think we're all proud of our heritage. Every member of this House, every member of our society is proud of where we came from and we try to celebrate it in our own way. The member from Durham brought some legislation forward I think last year to celebrate Irish heritage. In fact, I think as we speak, today is Tartan Day. The member from Grey-Bruce brought some legislation one or two years ago to bring forward Tartan Day—I believe it was the member from Grey-Bruce—and, as has already been mentioned, United Empire Loyalists' Day.

Certainly An Act to proclaim German Pioneers Day should be part of this wonderful mosaic, the many different cultures and the many different languages we have in this province. I believe the member has chosen the day after Thanksgiving as that specific day; I think that's the date that is spelled out in this legislation, that the day following Thanksgiving Day in each year is proclaimed as German Pioneers Day. I understand the rationale for that is that a lot of the culture in the Kitchener-Waterloo area goes around the wonderful Oktoberfest that takes place in that great city at that time of year. It takes place for six or seven days, I believe, and Thanksgiving is in the middle.

I looked at the Web site of Kitchener-Waterloo tourism, and I would recommend that members look at that. It talks all about the German history in this province. It talks about the history of how the German immigrants really founded and settled that whole area around Kitchener-Waterloo. That started, it seems, around the early 1800s, when Germans from Europe were attracted to Waterloo county because of the opportunity to use their trades: tailors, carpenters, blacksmiths, weavers and industrialists. From that point in time, the area grew tremendously and a government was later formed. Interestingly enough, as we all know, Kitchener was known as Berlin, subsequently changed to Kitchener, which was named after a famous British general. But that area certainly is rife with German heritage.

You go to the Oktoberfest, which has been mentioned—I recommend that all members read about it on the Web site and, better yet, go there. I support this legislation.

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**Mr Joseph N. Tascona (Barrie-Simcoe-Bradford):** I'm certainly pleased to join the debate with respect to An Act to proclaim German Pioneers Day, 1999, brought forth by the member for Kitchener Centre.

In my area of Simcoe county, there are a number of citizens of German heritage who have made tremendous contributions not only to the community at large but tremendous business acumen in bringing jobs. I can name two right off the bat, Ingrid and Wolfgang Schroeter, who run a business, Wolf Steel, manufacturing wood-burning stoves and barbecues.

Simcoe county has great significance because of the United Empire Loyalists. As we know, the United Empire Loyalists came to Canada after the Revolutionary War. On my mother's side, with name Chrysler, they came to Canada in the early 1800s. But John Graves Simcoe, for whom Simcoe county is named—I've taken this from a historical text. In 1791, John Graves Simcoe, who had been stationed near Philadelphia during the Revolutionary War and had become impressed with these and others such as the Quakers and Tunkers, determined that he would attract as many of these farmers as possible to Upper Canada. They came from virtually all states. Certainly my riding, with the exception of Orillia and the city of Barrie, is mostly rural and very strong agriculturally. I know that citizens of German heritage have farmed there for many years, and I think that is in large part due to the efforts of John Graves Simcoe.

I want to applaud the member for Kitchener Centre for remembering his ethnic roots and the contribution of German citizens to this country. I join in supporting this act.

**The Acting Speaker:** The member for Kitchener Centre has two minutes to conclude.

**Mr Wettlaufer:** I want to thank the members who participated in the debate: the members for St Catharines, Niagara Centre, Haldimand-Norfolk-Brant, Davenport, Waterloo-Wellington, Dufferin-Peel-Wellington-Grey, and Barrie-Simcoe-Bradford. They have all touched on some things I want to note here.

German Canadians today constitute the third-largest ethnic group in Ontario. Between two million and 2.5 million citizens of Ontario trace their ethnic roots to Germany.

I have a letter from the president of the United Empire Loyalists' Association of Canada, Edward Scott. He says, in part: "I am writing to affirm my full and complete support for your private member's bill as it will help promote greater public awareness and celebrate the achievements of our Loyalists and our Loyalist heritage. Those Loyalists, known as 'Pennsylvania Dutch' were so called, as you will be aware, because of a mistranslation of the term 'Deutsche,' referring to their German ancestry."

I also have a letter from David Young of our caucus. David is one of the Jewish members of this House. He says:

"German Canadians have a proud history of distinction and accomplishment. Since the mid-19th century, many German men, women and children have come to Canada in search of a new life and new opportunities. They have worked hard with people from other backgrounds to establish vibrant communities all across this province and to build a strong and united Canada. The contributions of German Canadians have helped make this country the best place in the world to live and raise a family."

Hundreds of Germans lost their lives in the American Revolutionary War, hundreds more lost their lives defending Canada in the War of 1812, and thousands upon thousands of German Canadians lost their lives in the First World War and the Second World War.

The member for Niagara Centre talked about the immigrants and the spoken language—

**The Acting Speaker:** The time for this ballot item has expired. I will now put the questions, first dealing with ballot item number 13.

#### MUNICIPAL AMENDMENT ACT (RENTAL HOUSING PROTECTION), 1999

#### LOI DE 1999 MODIFIANT LA LOI SUR LES MUNICIPALITÉS EN CE QUI CONCERNE LA PROTECTION DES LOGEMENTS LOCATIFS

**The Acting Speaker (Mr Michael A. Brown):** Mr Marchese has moved second reading of Bill 30, An Act to amend the Municipal Act to authorize certain municipalities to restrict the demolition of rental residential buildings.

Is it the pleasure of the House that the motion carry?

All those in favour will say "aye."

All those opposed will say "nay."

In my opinion, the ayes have it.

We will deal with this division following the next ballot item.

#### GERMAN PIONEERS DAY ACT, 1999

#### LOI DE 1999 SUR LE JOUR DES PIONNIERS ALLEMANDS

**The Acting Speaker (Mr Michael A. Brown):** Mr Wettlaufer has moved second reading of Bill 28, An Act to proclaim German Pioneers Day.

Shall the motion carry? Carried.

According to the standing orders, this bill is referred to the committee of the whole House.

**Mr Wayne Wettlaufer (Kitchener Centre):** Speaker, I would like the bill referred to the standing committee on general government, please.

**The Acting Speaker:** Is there a majority in favour? Agreed.

Call in the members; this will be a five-minute bell.

*The division bells rang from 11:58 to 12:03.*



MUNICIPAL AMENDMENT ACT  
(RENTAL HOUSING PROTECTION), 1999

LOI DE 1999 MODIFIANT  
LA LOI SUR LES MUNICIPALITÉS  
EN CE QUI CONCERNE LA PROTECTION  
DES LOGEMENTS LOCATIFS

**The Acting Speaker (Mr Michael A. Brown):** Would members please take their seats. Mr Marchese has moved second reading of Bill 30. All those in favour will please rise and remain standing.

**Ayes**

Agostino, Dominic	Crozier, Bruce	Martel, Shelley
Bartolucci, Rick	Di Cocco, Caroline	Parsons, Ernie
Boyer, Claudette	Dombrowsky, Leona	Peters, Steve
Bradley, James J.	Duncan, Dwight	Pupatello, Sandra
Bryant, Michael	Kennedy, Gerard	Ruprecht, Tony
Caplan, David	Kormos, Peter	Sergio, Mario
Christopherson, David	Kwinter, Monte	Smitherman, George
Churley, Marilyn	Levac, David	
Colle, Mike	Marchese, Rosario	

**The Acting Speaker:** Those opposed will please stand and remaining standing until their name is called.

**Nays**

Amott, Ted	Hodgson, Chris	Sampson, Rob
Baird, John R.	Hudak, Tim	Snobelen, John
Barrett, Toby	Johns, Helen	Spina, Joseph
Beaubien, Marcel	Klees, Frank	Sterling, Norman W.
Coburn, Brian	Marland, Margaret	Stewart, R. Gary
Cunningham, Dianne	Martiniuk, Gerry	Stockwell, Chris
Elliott, Brenda	Mazzilli, Frank	Tascona, Joseph N.
Flaherty, Jim	Molinari, Tina R.	Tilson, David
Galt, Doug	Munro, Julia	Tsubouchi, David H.
Gilchrist, Steve	Mushinski, Marilyn	Turnbull, David
Gill, Raminder	Newman, Dan	Wettlaufer, Wayne
Guzzo, Garry J.	O'Toole, John	Witmer, Elizabeth
Hardeman, Ernie	Palladini, Al	Wood, Bob
Hastings, John	Runciman, Robert W.	

**Clerk of the House (Mr Claude L. DesRosiers):** The ayes are 25; the nays are 41.

**The Acting Speaker:** I declare this motion lost.

All matters relating to private members' public business now having been completed, I do now leave the chair and return at 1:30.

*The House recessed from 1206 to 1330.*

MEMBERS' STATEMENTS

DAY OF MOURNING

**Mr Rick Bartolucci (Sudbury):** On April 28 we celebrate the national day of mourning, a time when we pay our respects to those workers who have lost their lives as a result of workplace injuries and occupational diseases. I will proudly be standing with Ron Laforest, the president of the Northeastern Ontario Building Trades Council, the United Steelworkers of America, CAW

Mine Mill and other unions in paying special tribute to the masses of workers who have died needlessly.

The memory of these workers must instil in all of us a greater level of commitment to create laws which will maximize the highest level of health and safety in the workplace.

I would like to recognize today Liz Van Rooyen, who is sitting in the members' gallery. She can speak first hand to the devastation of not having a loved one return home. Her husband, Dick, was killed while at work placing pylons along Highway 401. I commend Liz for her continued efforts to raise health and safety awareness and her fight for better legislation.

Let us remember as well Bert Bottrell, killed at Falconbridge's Lockerby mine, and Jim Plummer, who was killed in a blasting accident at Inco's South mine. These deaths must not be in vain.

Later I will be asking a page to bring a roll of X-ray tape over to the Minister of Labour, and I ask him to display this prominently in his office and look at the shattered bones of those who have been injured or killed in Ontario's workplaces. Minister, remember these people and their families as you draft your legislation, and help me convince your government of the need for a workplace carcinoma committee.

Lastly, 231 people have died in Ontario's workplaces this year. That is 231 deaths too many.

POLICE OFFICERS

**Mrs Julia Munro (York North):** I rise today to speak on an issue that is of great importance to the residents of York North and to all Ontarians: safe streets. During the 1999 election, the Harris government, my government, promised to put 1,000 new police officers on the streets. I can assure the people of York North that this is another example of our government's commitment to keeping its promises.

I was given the honour on Wednesday, March 22, to present a cheque to the newly appointed chief of police for York region, Robert Middaugh, for almost \$350,000. This cheque represents 41 new police officers already on the streets of York region, with 36 more approved for the region. These newly hired police officers are a direct result of this government's community policing partnerships program. Through this program, our government is keeping its promise of making Ontario a safer place to live, work and raise a family. We are providing matching funds for up to 50% of salary-related costs for newly hired police officers, who represent a net addition to the strength of our police services.

I am extremely proud of this government's record on keeping Ontario's streets safe. Since this program was introduced, over half of the new police officers have been hired and are working to keep our communities safe.

CHILDREN'S MENTAL HEALTH SERVICES

**Mr Dwight Duncan (Windsor-St Clair):** This morning I listened with great interest to the minister

without portfolio on children's services' reannouncement of funding for children's mental health services. I wanted to take this opportunity to remind the minister of the conditions in my community. In Windsor, approximately 16,000 children require some form of psychiatric help, and there are about 700 children on the waiting list today. Results from a study conducted by an independent researcher between 1992 and 1999 have prompted 15 children's services groups to ask for an urgent meeting with regional representatives of the ministries of Community and Social Services and Health—meetings which didn't happen.

Beginning with the New Democrats, funding for children's mental health services in Windsor-Essex county has been reduced 10.6%; that's \$1.6 million per year. Residential spaces: Again, cuts began under the NDP and continued under the Tories, from 102 spaces to 25. Residential receiving beds at the children's aid society went from 12 to zero. In addition, a number of other government initiatives have put pressure on children's services agencies. I have presented petitions to this Legislature on the issue. I have done much work, as my colleague from Windsor West has, before the last election and at this time to highlight this need in our community. The minister's announcement falls far short. This government has done nothing but harm children's services in Windsor-Essex county and indeed right across Ontario.

#### DIALYSIS

**Mrs Brenda Elliott (Guelph-Wellington):** Today I wish to inform members of the House about the success of the Guelph dialysis clinic. This clinic, which welcomed its first patient, Carmen Norris, last May, now treats 22 people and is planning to treat at least a dozen more. It's a satellite of the Grand River Hospital in Kitchener and is designed to look more like a home than an institution.

Before this centre opened, Guelph-Wellington residents had to travel to the Kitchener clinic for three-times-a-week treatment, only to return to Guelph exhausted. They are very relieved that they no longer have to go through this ordeal of travel.

I would like to thank Joan Fenlon, Newt and Marguerite Clayton, and Marty Fairbairn, who is here in the gallery today, for their leadership in helping this facility become a reality. The Guelph Rotary Club; Patrick Gaskin, vice-president at the Grand River Hospital; Kim Hendrix, the unit's nurse in charge; and Dr Peter Somerville are key in keeping this unit running well.

This clinic is another example of the Mike Harris government's commitment to health care in Ontario in the face of chronic and worsening underfunding from the federal Liberal government. Since 1995, our government has invested \$81 million in dialysis services all across the province. Hundreds of new patient places have been created. Just imagine how many more we would have if Allan Rock would do his job and restore the money that

the federal Liberals have cut from health care. Perhaps then all satellite clinics could offer full service to every dialysis patient in need.

#### SOINS COMMUNAUTAIRES

**M. Jean-Marc Lalonde (Glengarry-Prescott-Russell):** Ma déclaration est pour la ministre de la Santé.

Madame la ministre, je vous adresse la parole aujourd'hui au nom de plusieurs personnes âgées de ma circonscription. Ces personnes ont appelé mon bureau en pleurant, ne sachant quoi faire. On venait tout juste de leur annoncer que leur service de soins à domicile serait coupé. Plusieurs de ces personnes sont âgées d'au-delà de 90 ans. Oui, plus de 90 ans, madame la ministre, et pourtant le gouvernement Harris avait bien promis d'augmenter les services de soins à domicile afin de maintenir les personnes âgées dans leur foyer aussi longtemps que possible.

Mais voilà que les centres d'accès aux soins communautaires doivent couper ces services car ils desservent un nombre de plus en plus élevé de personnes âgées et un nombre accru de patients sortant des hôpitaux plus tôt, et ce avec la même enveloppe budgétaire.

Madame la ministre, je demande donc aujourd'hui votre engagement à verser des fonds additionnels à ces centres d'accès aux soins communautaires afin de répondre aux besoins immédiats de nos personnes âgées. Ces personnes nous sont toutes très chères et ne méritent pas ça. Nous nous devons de faire tout notre possible pour les garder dans leur foyer le plus longtemps que possible. Ai-je votre engagement, madame la ministre?

#### DAY OF MOURNING

**Mr David Christopherson (Hamilton West):** The Hamilton labour movement will hold a day of mourning on April 28 for the many workers who have died on the job in Ontario. The tragedy of workplace accidents is particularly heightened this year by the 40th anniversary of the Hog's Hollow disaster, where five Italian immigrant construction workers lost their lives. We honour their memory.

Following that tragic disaster at Hog's Hollow, Ontario labour laws and safety regulations were rewritten, beginning in the Robarts era and then under Premier Bill Davis, and strengthened yet again under the NDP. One of Bill Davis's ministers was Frank Drea, who was a Toronto Telegram reporter covering the Hog's Hollow disaster. His graphic descriptions informed Canadians of the horrible tragedy. Mr Drea continued to report on the public outcry over the deaths and on the efforts of workers to organize trade unions to protect themselves from similar disasters.

On March 17 of this year, Frank Drea attended the public remembrance for the workers killed at Hog's Hollow and reminded us that the labour laws and safety changes which came from that event constitute the foundation of today's vastly improved construction



safety record. However, construction workers today and their families are worried that the protection gained in those days will soon be rolled back because of lobbying by some of Ontario's biggest contractors.

1340

April 28 is the annual day of mourning for workers killed on the job in Ontario. I urge all members of this House to mark a minute of silence at 11 am on that day and to join the ceremonies in their respective communities.

### TARTAN DAY

**Mr Bill Murdoch (Bruce-Grey):** Today, April 6, is Tartan Day in Ontario. Back in 1991, I introduced a private member's bill marking this day in our great province, and it wasn't just to make sure I had an opportunity to wear a kilt, either.

Did you know that the word "kilt" is a play on the word "Celt"? While it looks like a type of skirt, it is actually it a descendant of the early battle garb that was worn by Roman soldiers. The tartan can be worn in the form of a dress, a sash, a scarf or a tie—the tie being, at one time, simply a large bandage crusaders to be prepared in case of being wounded—a pretty useful tool around here if you ask me after listening to some of the debate in the past week.

Scotland has had a direct impact on the history of Ontario. One would be hard pressed to find even one aspect of our history, culture, laws or government that was not positively impacted by the Scots. This is our heritage. The tartan is justifiably a representative symbol for all Ontarians, even in a multicultural society. That is why, later this session, I will be bringing in a bill for second reading that, if passed, will finally see the province with its own official tartan. I know all members of this House will give easy passage to this bill. After all, a province that has adopted a Tartan Day surely will adopt an official tartan.

### MUNICIPAL RESTRUCTURING

**Mr Michael Gravelle (Thunder Bay-Superior North):** Yesterday's decision by the Ontario Court of Appeal to uphold the provincial government order to merge Beardmore, Geraldton, Longlac and Nakina into a single community of Greenstone has understandably created a great deal of confusion and concern in all the affected communities. What still remains unclear is whether the ruling is immediate or will go into affect after this year's municipal elections. Another possibility is that this legal decision could be subject to further appeal to a higher court. But surely the real issue that the government should be dealing with on an urgent basis is whether or not this forced amalgamation makes any sense at all any more.

When the government first gave the order to amalgamate over three years ago, it was on the basis of potential savings to taxpayers. While I disagreed at that

time that any substantial savings would result from this merger, it should be clear, especially to Minister Clement, that as of today, circumstances have changed so considerably that taxpayers will quite possibly see no benefit from this amalgamation moving forward now. That being said, I am calling on the Minister of Municipal Affairs today to consider setting aside this ruling on the basis that the reasons for the forced amalgamation no longer apply. Furthermore, I think it is crucial that the minister become involved in this personally by meeting with the municipal leaders of all the affected communities. This decision will have a dramatic impact on everyone living in the vast area and the minister must respect that. This needs to be resolved quickly, but it must also be resolved fairly. My constituents deserve nothing less.

### DAY OF MOURNING

**Mr John O'Toole (Durham):** The member from Hamilton West and all of us share the interest of the importance of workplace safety, and every April 28 the Legislature joins with all Canadians in a national day of mourning, paying tribute to those workers who have suffered an injury or death on the job. It is a solemn and sad occasion. It lets us all reflect on our responsibility to ensure that workers return home safely to their families each evening. No job is worth dying for.

The day of mourning is an opportunity for us as legislators to affirm our shared commitment to preventing workplace injury. We are making progress. Our province will meet our target of a 30% reduction in lost-time injuries over the five-year period. However, the job is clearly not done. Our government is committed to preventing further workplace tragedies. Our new provincial strategy involves key safety partners, such as the Industrial Accident Prevention Association, working together towards eliminating on-the-job injuries. We are lowering occupational exposure limits. We are strictly enforcing the Occupational Health and Safety Act.

On Thursday, April 27, in accordance with tradition, there will be a statement from our Minister of Labour and a minute of silence in this Legislature. On April 28, the flag at Queen's Park will be lowered to half mast. I urge all members to honour those who have lost their lives on the job and to remember with compassion their families and their loved ones.

### VISITORS

**Hon Tim Hudak (Minister of Northern Development and Mines):** On a point of order, Mr Speaker: I'd like to let the members of the Assembly know that we are joined in the members' gallery today by two outstanding youths from Port Colborne and Wainfleet in my riding, Joey Crawford and Matt Lambert, winners of the Canada Youth Award. Welcome to Queen's Park.

**The Speaker (Hon Gary Carr):** It's not a point of order, but we recognize our guests who have come.

*Interjection.*

The government House leader has a motion. Unanimous consent to go to motions, if we could. All in favour of going to motions? Agreed.

**MOTIONS****STANDING COMMITTEE ON  
GENERAL GOVERNMENT**

**Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader):** I'm sorry, Mr Speaker, I was taken aback by the Palladini tartan, and I did refuse to look at Bill Murdoch's legs.

I seek unanimous consent to move a motion without notice regarding the mandate of the general government committee.

**The Speaker (Hon Gary Carr):** Mr Sterling seeks unanimous consent. Agreed? Agreed.

**Hon Mr Sterling:** I move that for the purposes of standing order 124, the standing committee on general government be authorized to consider the matter of the creation of an association of former parliamentarians.

**The Speaker:** Is it the pleasure of the House that the motion carry? Carried.

**ORAL QUESTIONS****ONTARIO REALTY CORP**

**Mr Dalton McGuinty (Leader of the Opposition):** My question is for the Chair of Management Board. Minister, you know that this week we have raised with you the matter of three property sales that have cost Ontario taxpayers \$10 million.

I want to raise with you today the subject of a fourth property, located on Bloomington Road in Aurora. There is a sale there that has not been finalized. It is conditional on some rezoning. That sale, we understand from the Ontario Realty Corp, is also under investigation. Notwithstanding the fact that this property sale is under investigation by the police and the auditors, we understand that the Ontario Realty Corp is taking this matter before the Ontario Municipal Board to help expedite and finalize the sale of this property.

Can you tell us, Minister, if this deal is under investigation, as we believe it to be, why all matters connected with it have not been frozen?

**Hon Chris Hodgson (Chair of the Management Board of Cabinet):** I'm not aware of the specifics. I can assure this House that we are taking the proper steps, acting on the advice of the assistant Attorney General of criminal law. That is the advice we are following. The transaction you are talking about hasn't happened. I'll talk to the chair of the board to find out the specifics on

it, but it is not my understanding that anything has happened on this outside of the advice we received from the auditor and the Attorney General. I'm not aware of what is under investigation or if there is an investigation. I have been asked not to comment on specifics. If you are aware of that, I'd like to know how you were made aware of that.

**1350**

**Mr McGuinty:** Minister, you are not taking all the right steps in the circumstances. First of all, we've been advised by the vice-president of the ORC, Christopher Barry, who tells us that this transaction is the subject of an investigation. It is under investigation. Here's another aspect to this deal: It turns out that the Aurora deal has the same buyer as the Mississauga deal, and the Mississauga deal is also under investigation. That's the one where the buyer purchased the land for \$1.9 million and flipped it for \$4.4 million. What we've got here are two deals that are under investigation. Both involve the same developer.

Minister, why have you not instructed the ORC to freeze all activity at least in connection with all matters that are under investigation?

**Hon Mr Hodgson:** First of all, we are following the advice of the Attorney General and the auditor. The senior management team of Christopher Barry, the person you referred to, and others in the ORC are reviewing all the current transactions to make sure the proper processes are followed. They are taking the proper steps in terms of asking the auditor to look at all past transactions. All transactions going forward are following the new criteria adopted by the board, and the senior management team review those. We're doing the right thing. We're as concerned as you are about these issues and we're doing everything we can to find out the truth about them.

**Mr McGuinty:** It seems to me that if you were genuinely concerned about the loss of millions of taxpayer dollars in connection with these land deals, what you would be doing today, at minimum, is insisting that all activities connected with land sales that fall under the auspices of the ORC in Ontario be frozen.

To make matters worse, when we talk about this particular piece of land in Aurora, we're talking about land on the Oak Ridges moraine, a highly sensitive bio-region. The lawyers for the ORC are helping to push this matter through the OMB in order to help the developer develop on lands on the Oak Ridges moraine.

Again I ask you, Minister: If you are so genuinely and sincerely concerned about the loss of millions of taxpayer dollars, why have you not ordered, at minimum, a complete freeze on all activities affecting those lands and those transactions that are at present under investigation?

**Hon Mr Hodgson:** I have tried to make clear to the Leader of the Opposition that we are acting on the recommendations of the proper authorities, not on speculation of what is or isn't under review.

As the Leader of the Opposition is aware from earlier answers this week, the board of the Ontario Realty Corp



has adopted stringent new policies and procedures that govern all realty transactions. All pending transactions are being reviewed by the senior management team to ensure that the transactions adhere to the newly enhanced policies, and only those transactions that meet the new criteria will be approved.

You already mentioned in your first question that this transaction has not been approved. I think the proper steps are being taken. I will mention your concern, though, and pass it on to the chair of the Ontario Realty Corp.

**The Speaker (Hon Gary Carr):** New question, leader of the official opposition.

**Mr McGuinty:** This question is for the Minister of Transportation. Yesterday the Chair of Management Board said that he was not responsible for the sale of one of these properties, the property in Mississauga. He said that was your responsibility.

I want to ask you, Minister, if you might shed some light on the sale of the property in Mississauga. That's the one that cost Ontario taxpayers \$2.4 million. I wonder again if you might shed some light on that sale transaction and I ask, since this minister won't take responsibility, if you will take responsibility for that \$2.4-million loss.

**Hon David Turnbull (Minister of Transportation):** I refer it to the Chair of Management Board.

**Hon Mr Hodgson:** The Leader of the Opposition asked these questions yesterday. I told the truth, that some properties do not require an order in council, and Ministry of Transportation properties that are held in their title do not.

The act hasn't changed since 1980, but in 1980 it was required that an order in council must be produced for every sale of property. That was changed in 1989 by your party when you were in power. You delegated the authority so you didn't need to have an order in council. It went to a regional director inside the bureaucracy. Your government is the one that made the standards looser.

**Mr McGuinty:** I have in my copies a deed, a transfer of land. This is for the Mississauga property. It's signed by an individual on behalf of, it says, "Her Majesty the Queen, in the right of the province of Ontario" as represented by the Minister of Transportation for the province of Ontario. So I can't understand why the Minister of Transportation, who signed off on this deal, has now referred this question back to you.

Back to the Minister of Transportation. This deal cost Ontario taxpayers \$2.4 million. It was authorized by your ministry. It was signed on your behalf by some officials. We're just trying to figure out over here, on behalf of Ontario taxpayers, where the buck stops when it comes to the taxpayers' losses. So back to you again, Minister: Will you or will you not accept responsibility for the sale of land that cost Ontario taxpayers \$2.4 million, a deal which was signed in the name of your ministry?

**Hon Mr Hodgson:** I think the Leader of the Opposition knows full well that everyone in this House is concerned about taxpayers receiving fair value and

appropriate value from the Ontario Realty Corp or from the MTO or from any dispersal of assets.

*Interjections.*

**The Speaker:** Order. We can't continue as long as the members are shouting at the minister when he's trying to answer.

**Hon Mr Hodgson:** The problem that he is aware of full well is that we can't talk about the specifics of transactions that are under review, going through the proper process of having an auditor and having the police called in. You know that. You know we can't talk about the specifics. I can tell you about general policy, though. The general policy that your government implemented was that OICs were delegated down to the Ministry of Transportation by Ed Fulton. That is what took place and that's the answer to your question. It's not a question of partisan politics.

*Interjection.*

**The Speaker:** Member for Windsor West, come to order, please.

**Mr Dwight Duncan (Windsor-St Clair):** Oliver Mowat set up the ministry. Blame him.

**The Speaker:** Member for Windsor-St Clair, come to order, please.

**Mr Bruce Crozier (Essex):** Nobody's in charge over there. Nobody will take responsibility. What a bunch.

**The Speaker:** Member for Essex. Members will know that question period is an opportunity to hold the government accountable with questions, and we won't be able to do that.

*Interjections.*

**The Speaker:** That's fine. We'll just stand here all day, then. We'll stand here and let the clock run down if you're going to continue to shout, and there won't be any questions allowed to be asked.

Chair of Management Board.

**Hon Mr Hodgson:** This isn't a question of partisan politics. We're as concerned about these issues as every member in this House. That's why we've taken the proper steps to get to the bottom and find out the truth. That's why we've had the auditors come in. That's why the police have been called in to review these files.

In regard to the chain of authority, hypothetically, what you did in 1989 was make an order in council unnecessary to sell MTO property. That's the answer to your question.

1400

**Mr McGuinty:** Ontario taxpayers do not want your weak expressions of concern. They don't care about protocol and bureaucratic managerial procedures. They want to know if anybody over there has the guts to take responsibility for the loss of over 10 million taxpayer dollars. That's what they want to know. You're saying, "No, it was his fault," and he's saying it wasn't really his fault, it's back to you. What Ontario taxpayers want to know is: Does anybody over there have the guts to take responsibility for the loss of over 10 million taxpayer dollars?

There is an old-fashioned principle called ministerial responsibility. Ultimately, the buck must stop with one of you ministers. All we want to know is, which one is going to take responsibility for the loss of over \$10 million?

**Hon Mr Hodgson:** I don't have the luxury the Leader of the Opposition has to make speculations on whether money is lost or whether the taxpayers got their true value. We are concerned about those stories and those important questions. They need to be asked and to be answered in the proper process. We on this side of the House don't have the luxury of being casual in our comments.

What we are doing is following the proper process in accordance with the Attorney General—

*Interjections.*

**The Speaker:** Would the member take his seat. Order. Chair of Management Board.

**Hon Mr Hodgson:** In conclusion, we are following the proper process. We are trying to get to the bottom of this. We got the auditor involved. The auditor found some irregularities, and the police were called. That is the appropriate action to take in these situations to get to the truth.

#### FAMILY RESPONSIBILITY OFFICE

**Ms Shelley Martel (Nickel Belt):** I have a question for the Attorney General. On April Fool's Day, your government introduced new user fees at the Family Responsibility Office, contrary to the statement you made in this Legislature on November 24, when you said: "It's being suggested that the government would charge a recipient to find out how much is owed. That's wrong." In fact, that's exactly what you are doing with your new fees.

You plan to raise \$1 million annually on the backs of women and children and responsible payers who are actually making their support payments. Worse still, this \$1 million doesn't even go back to the FRO to hire more staff or to do more enforcement. It goes directly into general revenue, no doubt to support your tax break for your wealthy friends.

Minister, how can you possibly justify these cash grabs on the backs of women and children and responsible payers?

**Hon Jim Flaherty (Attorney General, minister responsible for native affairs):** As the member knows from previous answers to her questions relating to this issue, most of the fees are paid by payers, with the exception of third parties seeking statements with respect to payers for real estate transactions and that kind of thing. I think the honourable member is familiar with that, or at least I hope she is.

The fees serve as an incentive to payers to fulfill their responsibilities to their spouses and to their children. Avoidance of the penalty fee is certainly available to payers if they simply honour their obligations on a timely basis.

**Ms Martel:** Minister, just to prove how wrong you are, we have the breakdown of the revenue you hope to grab from each new user fee. It was provided to us by your deputy.

You will make \$600,000 of the \$1 million by charging recipients and responsible payers \$25 when they request a statement of their accounts. You'll make another \$180,000 by penalizing responsible payers who give their families some extra money at Christmas or at the start of the school year by charging them \$100 when they have to have their adjustment made after that payment. You're going to make another \$35,000 off the backs of responsible payers by charging those who use postdated cheques to make their support payments \$10 per cheque. These are people who are making their support payments. In fact, with four of your five new users' fees, you will make \$900,000 of the \$1 million, and none of those four fees has anything to do with getting at deadbeat dads.

I ask you again, Minister: How can you possibly justify this tax grab off the backs of women and children and responsible payers?

**Hon Mr Flaherty:** As the member knows, the operations of the Family Responsibility Office are paid for by all the taxpayers of Ontario at a cost of approximately \$28 million, as I recall. Those expenses are borne by all the taxpayers of Ontario, not just spouses who have had dissolution of their marriages or common-law relationships.

This is some recovery of fees for third parties, for requesting formal statements and that type of thing. There's been notice given to the payers over the months leading up to the commencement of these fees in the month of April, so there's been good notice.

With respect to post-dated cheques—and that's an interesting point—the FRO is encouraging payers to use electronic methods to make the payments. It reduces overhead. It's good business practice. It's commonly used, as the member probably knows, by most financial institutions in Ontario. It's the best practice.

**The Speaker (Hon Gary Carr):** Final supplementary.

**Mr Peter Kormos (Niagara Centre):** The Attorney General is trying to create the impression that this is about punishing or going after deadbeat dads. Ninety cents of every dollar that you're going to collect, 90% of that \$1 million, is going to come from responsible payers and from women and kids. Only 10% is scheduled to come from deadbeat dads. An enforcement fee of \$400 a payer amounts to a grand sum of but 250 deadbeat dads. That's all you expect to find over the course of the next fiscal year, but 250 deadbeats. You're going to attach 400 bucks on to each of their accounts, but you can't even find them, nor can you collect money from them. You haven't been able to in the past. You haven't demonstrated any capacity to do that now. You're punishing women and kids. You're imposing user fees on responsible payers.

This isn't about deadbeat dads. It isn't about the FRO. It's about you raising new general revenues on the backs



of kids, their mothers and responsible fathers. How is this going to make the FRO work better in view of the fact that it continues to operate at a pathetic, abysmal level, subject to your irresponsible leadership?

**Hon Mr Flaherty:** With respect to the comments made by the member, FRO is effectively collecting substantial sums of money, over \$500 million last year for spouses and children. It is a record amount being collected by the Family Responsibility Office.

The member opposite feels that they are not doing their job, I gather. They are operating at a record level. They are collecting more money for spouses and children than any similar operation in this country. Improvements need to be made at the Family Responsibility Office, and certainly we continue to work to improve that office for the benefit of women and children and others entitled to be paid in Ontario.

#### ONTARIO REALTY CORP

**Mr Howard Hampton (Kenora-Rainy River):** I have a question for the Chair of Management Board. The question concerns your government's interference at the Ontario Realty Corp.

We have been told that John Bell, former president of the Ontario Realty Corp, appeared at a Conservative caucus meeting in December 1998 and that a number of Conservative caucus members were upset that certain key Conservative Party supporters were not getting enough realty corporation business. Following that, we're told that you attended an ORC board meeting and you asked that the board remove John Bell as president. You then fired Mr Bell yourself and, as that happened, three members of the board—Jay Huckle, Michael McClew and Graeme Eadie—resigned in protest.

Minister, do you deny you attended a board meeting of the Ontario Realty Corp and asked that John Bell be removed as president?

**Hon Chris Hodgson (Chair of the Management Board of Cabinet):** The preamble of this question is just filled with innuendo. To my knowledge, that's absolutely not true or correct, and you ought to know that.

The Ontario Realty Corp board of directors is approved through this House. All these board members have been unanimously approved by this process, by all three parties. This board takes its responsibility very seriously. The new board of the ORC accepted Mr Bell's resignation and they've proceeded to hire a new president and a new executive team.

1410

**Mr Hampton:** Speaker, here we have again a minister who claims that he wants to get to the bottom of it refusing to answer the question. Simple question: Did you go to the board and ask that John Bell be fired? Yes or no?

Minister, you also claim that Tony Miele was not in charge at the Ontario Realty Corp until April 1999, and therefore had nothing to do with the two deals the Ontario Realty Corp signed in March of that year in

which the taxpayers of Ontario got shafted. But we understand that Mr Miele was effectively in charge from the time of Mr Bell's departure and personally reviewed all large ORC sales. This would make him very much responsible for the two sales in March, All-City Storage and Gabriele, where the taxpayers were shafted.

Do you deny that Tony Miele sent out a memo in January 1999 detailing that he was reviewing all ORC transactions over \$1 million in value?

**Hon Mr Hodgson:** I do know that your board, the Ontario Realty Corp, hired Mr Miele in April to be their new CEO. In the time that Mr Bell resigned until Mr Miele was chosen and hired, Joe Mavrinac was both chair and president. Mr Mavrinac has a reputation that is outstanding.

The former Attorney General of this province knows full well that I can't talk about the specifics of transactions. He knows what I'm allowed to talk about and what I'm not. He knows that if I do answer that, he'll be the first one on his feet saying that I'm just interfering.

*Interjections.*

**The Speaker (Hon Gary Carr):** Minister, take a seat. Order. I can't hear the reply when people are shouting at the minister, the Chair of Management Board, and I don't know if he's finished. New question.

#### GOVERNMENT ADVERTISING

**Mr James J. Bradley (St Catharines):** Thousands of patients in Ontario are waiting for cardiac surgery, hip and knee replacements, cataract operations and other essential medical procedures. While cancer patients are being sent out of the country to receive urgent radiation treatment, while hospital emergency rooms are overcrowded and hospitals are forced to close their doors to patients, the Harris government has spent millions of dollars on self-serving, blatantly partisan advertising on television and radio, in newspapers and propaganda pamphlets mailed to households across the province.

The Provincial Auditor, the Canadian Taxpayers Federation, a former Speaker of this House and thousands of people in Ontario have called for an end to the use of taxpayers' dollars for this kind of propaganda war that you're engaging in. Will you now order an immediate end to the most recent blitz of partisan ads and have the Conservative Party reimburse Ontario taxpayers for this abuse of their hard-earned tax dollars? It's your responsibility. Don't try to pawn it off on her.

**Hon Chris Hodgson (Chair of the Management Board of Cabinet):** I think the member opposite is aware that this government has had a large change in agenda in the last number of years. We are trying to get this province back on the right track. I would put our advertising spending up against your government's record of advertising spending any day of the week. We have tried to spend in the most cost-effective manner to explain to the public the changes that are needed and the changes that we're going through as a province.

**Mr Bradley:** I know the whiz kids in the Premier's office have told you that you can get away with this, with

squandering millions of dollars on self-serving, blatantly partisan advertising at taxpayers' expense, because media sources receive the money from this advertising. I happen to believe that you're wrong. They recognize this as an abuse of public office, an abuse of tax dollars and an abuse of our democratic system. As watchdogs for the residents of Ontario, they, and we, will not let you get away with it.

Here's what the Ontario Hospital Association says could be done with \$3 million in the health care field: 240 cardiac surgeries; the removal of 3,000 cataracts; it would treat 15,000 emergency room patients and run three MRIs for a year. Will you finally do what is right and abandon this clear and arrogant abuse of public office by ending this propaganda blitz and investing the money instead in the field of health care?

**Hon Mr Hodgson:** If the member is not aware, our health ads cost less than \$3 million. That's a pretty good investment if we can get the federal Liberals to live up to their end of the bargain in providing better health care for Ontarians. That's an investment the taxpayers of Ontario would appreciate and the people of Ontario need.

#### CHILDREN'S MENTAL HEALTH SERVICES

**Ms Marilyn Mushinski (Scarborough Centre):** My question today is for the Minister without Portfolio responsible for children. Minister, we know there's nothing more precious to a parent than the love of a happy, healthy child. I myself have a young grandson who brightens every day of my life just with his smile. Unfortunately, some parents face great challenges with their children.

I understand that earlier today you made an important announcement concerning children's mental health across the province. I wonder if you could please provide us with the details of this announcement.

**Hon Margaret Marland (Minister without Portfolio [Children]):** In 1998, the Premier asked me to review the delivery of children's mental health services in this province. I'm happy to say that the announcement I have made today is the support of our government taking action on my recommendations. We have clearly demonstrated that commitment in the Ontario budget by allocating an initial \$10 million, growing to \$20 million, in new annual spending for children's mental health. So today it's my pleasure to share the results of the work we did. We now have a four-point plan for \$20 million, which responds to what I heard during my meetings and my review and consultations around this province. It fulfills the commitment; we have kept our promise of the commitments in the budget.

**Ms Mushinski:** Thank you, Minister, for that informative response. It clearly demonstrates your commitment to the health needs of our children in Ontario. I understand that this—

**The Speaker (Hon Gary Carr):** Point of order, the member for Windsor-St Clair.

**Mr Dwight Duncan (Windsor-St Clair):** If the government was really proud of this announcement, I would

think they would have done a ministerial statement today in the House—

**The Speaker:** That is not a point of order. Would the member take his seat.

**Ms Mushinski:** Thank you, Mr Speaker. I appreciate that, having been so rudely interrupted. I wonder if I may start my question again: I understand that this additional funding is going to be disbursed based on a four-point plan, and I wonder if you could describe what the four components of this plan are.

**Hon Mrs Marland:** I'm happy to enlarge on our four-point plan. First of all, it's \$11.9 million of new funding. It provides for more intensive child and family services: \$5.5 million for new mobile crisis response teams; \$400,000 to establish tele-psychiatry in 10 rural and remote communities across Ontario, beginning in May; \$2.2 million to introduce standardized intake and assessment outcome measures; and a new province-wide children's mental health information system. Our four-point plan will lead to the innovative and accessible children's mental health services that we promised in the last budget. The best news about this announcement is that our government has kept our commitment. We must continue to work together to improve innovation and more effective ways to serve these children and their families. Finally, I really appreciate—

**The Speaker:** I'm afraid the minister's time is up.

#### PARENTAL RESPONSIBILITY

**Mr Michael Bryant (St Paul's):** My question is for the Attorney General. From Family Responsibility Office fumbling to Parental Responsibility Act bungling, the families of Ontario are not being well served by this government. This government is engaging in social hot-button politics. You are pushing the hot button of parental responsibility and hoping, at the end of the debate, that you are going to look like you invented the concept. Well, just like Al Gore didn't invent the Internet, you didn't invent parental responsibility. In fact, it's been on the books for 10 years. For 10 years, the people of Ontario could go to Small Claims Court, could go to Superior Court, and sue a parent for something a kid did. It's been on the books for 10 years, and for 10 years it has stated under the Family Law Act that the onus of responsibility for proof lies on the parent—not on the victim, on the parent. Instead there's been some suggestion that the onus has been reversed, that somehow the onus has been moved. In fact, it has made no difference at all.

1420

Minister, this was a very cynical act, in cutting and pasting an old piece of legislation and pretending you invented the concept, importing this cynical legislation from the Tory government in Manitoba, that has not made a whit of difference. Minister, are you going to take family responsibility seriously or are you just going to continue to play politics?



**Hon Jim Flaherty (Attorney General, minister responsible for native affairs):** The member should know that the legal responsibility of parents for the conduct of their children is much more than 10 years old. In fact, it's in the common law, and it has been a responsibility for generations. I invite my friend opposite to study the question.

The difficulty is the Manitoba legislation and the Family Law Reform Act provision in Ontario have not been effective in addressing the problem. That's the reason for reform. That's the reason for the bill.

**Mr Bryant:** Minister, in fact the common law position never established that a parent could come to court and say, as an excuse, that they took some counselling courses and therefore that means they reasonably were supervising their child. Counselling courses are good, but this is a new defence; this is a new excuse for parents to make. It's not established in the common law. In fact, your government has been helping defence lawyers in their arsenal to stand up for parents instead of helping victims.

Minister, I think it's time for us to work together, to come forward and make amendments to this bill so that we can make a positive contribution—

*Interjections.*

**The Speaker (Hon Gary Carr):** Would the member take his seat. Order. Member, continue please.

**Mr Bryant:** Minister, the Ontario Liberals will be tabling amendments. We want to make a positive contribution to parental responsibility. I understand that this government wants to play politics and I call on the minister: Let's take a non-partisan basis and try to do something for the victims of crime and do something for parental responsibility in this province. Will you agree in principle to make some amendments to make a positive contribution in this area?

**Hon Mr Flaherty:** I gather, from what the member opposite is saying, that his party is going to support the bill, and I appreciate that. The bill certainly deals with important issues like the responsibility of parents in our society to supervise their children and the effort that parents ought to make, and many parents do make, to instill respect for the law in their children.

The bill does a number of significant things: It creates a presumption with respect to intentional conduct; it makes it possible to use an order of disposition under the Young Offenders Act in the Small Claims Court; it provides for payments over time; and it provides for—

**The Speaker:** Order. Member, take your seat.

#### MINING INDUSTRY

**Mr Doug Galt (Northumberland):** My question is directed to the Minister of Northern Development and Mines. As you know, the mining industry is a significant contributor to Ontario's wealth. The strength of the mining business is particularly important to the economic viability of the north, where so many communities have been built on the prosperity of this industry. As we all witnessed with the Bre-X scandal—something like a

Liberal scandal—decisions that have been based on incomplete and inaccurate mining data can harm the individual investor and bring the integrity of the Canadian markets into question.

Can you please explain to the Legislature what actions the ministry is taking to protect the many good people across Ontario who invest in the mineral sector and help prevent scandal of this kind from being repeated?

**Hon Tim Hudak (Minister of Northern Development and Mines):** I want to thank the member for Northumberland for a very intelligent question.

As the members in the House may be aware, about 40% of the world's mineral capital is raised in Canada. In Toronto, the TSE is the single largest source of mineral investment worldwide. As a member of this government, I am committed to ensuring that Ontario maintains its reputation as one of the most attractive and safest places for mineral investment.

That's why last month at Mining Millennium we unveiled proposed draft legislation that, if passed by the assembly down the road, would create a self-regulating body of geoscientists to establish professional standards that help safeguard the public and boost investor confidence. By proposing the creation of the self-regulating professional body of geoscientists, we are reinforcing Ontario's position as one of the safest, most attractive places—

*Interjections.*

**Mr Dwight Duncan (Windsor-St Clair):** Try and do it without reading, Tim.

**The Speaker (Hon Gary Carr):** Order. Would the member take his seat.

Just before we begin, if the members could try and keep the comments that may be inflammatory to a minimum, it would be helpful. Sometimes, I know, we go back and forth, but if we keep it to a minimum, it will be helpful.

The member for Northumberland.

**Mr Galt:** I very much appreciate your comments, Mr Speaker.

Minister, I've been absolutely intrigued with some of the stories about prospectors for gold and some of the stories we hear about evaluations of where to dig for mines and some of the penny stocks as they move around. But you say that this initiative will protect the public from fraudulent claims and will provide for the accountability that geoscientists themselves want. In what way has the mining community offered input on this draft legislation, and how do other affected bodies like the Toronto Stock Exchange, for example, feel about this proposed regulating body?

**Hon Mr Hudak:** In fact, the member is correct: This responds directly to the joint task force of the TSE and the Ontario Securities Commission in the wake of the Bre-X scandal. I want to make sure through this process as well that all interested parties have the opportunity to comment on the geoscientist legislation. I want to make sure that all affected groups have their voices heard and that their concerns are considered. That's why I've

appointed my parliamentary assistant, Jerry Ouellette, to lead province-wide consultations on this process in the next few weeks, to bring back the best piece of legislation to reinforce Ontario's reputation as the best and safest jurisdiction for mining investment and to help stimulate growth in northern Ontario and across the province.

### LABOUR LEGISLATION

**Mr David Christopherson (Hamilton West):** My question is to the Minister of Labour. Minister, on February 4 this year, 10 electricians were fired by the Drycore Electric Co because they tried to join a trade union. Now two months have passed and there's not even a date set to hear their complaint.

Since your government passed Bill 31, at least four other construction firms have fired workers for trying to organize. You scrapped expedited hearings and you took away the one remedy that employers actually paid attention to: automatic certification. These employers are breaking the law, and it's your job to protect construction workers from employers that break the law. We had laws that employers respected and that protected workers' rights, and you eliminated them. Your law is not working. What are you going to do for those construction workers, Minister?

**Hon Chris Stockwell (Minister of Labour):** I'd like to thank the member for the question. Obviously, it's up to the Ontario Labour Relations Board to determine whether or not any law has been broken. Certainly you wouldn't suggest that a member of this House could pre-judge a decision by an arm's-length body that adjudicates these particular situations. Therefore, they've got an application in to the Ontario Labour Relations Board, they will have their hearing, and if in fact the employer is doing anything that's illegal or wrong, they will suffer the consequences of the decision of the Ontario Labour Relations Board.

I will add that that decision should not be pre-judged by you or me. We should allow them to act in an autonomous fashion, free of political interference. That's what I thought all of us agreed with: that no political interference should be applied to any judicial body that works at arm's length from here. If you're suggesting to me that politicians should become involved in judicial decisions, then I sadly disagree with you.

1430

**Mr Christopherson:** The fact of the matter is that in taking a complaint to the labour board prior to your law, workers had the right to an expedited hearing because of the nature of the firing, the fact that workers are democratically allowed to join unions. You took away that expedited hearing process. That's why there's no date set for those workers yet. And why there are more and more employers firing construction workers and other workers who are trying to organize is because you've watered down the penalties if they get caught. The only thing that really stopped that was automatic

certification, which by the way was brought in by a Tory government decades ago.

Minister, your laws have failed to protect the rights of workers just as we told you they would. You have an obligation to stand in your place today and say that you'll put those laws back in place and protect workers who choose to democratically join a union.

**Hon Mr Stockwell:** We have a fundamental difference of opinion with respect to democratic process. Your argument is this: When a union goes in to organize a workplace and they go to the Ontario Labour Relations Board, the remedy should be that at some point they be automatically certified. Where is the choice for the workers when an autonomous board decides that they should be organized? That's not choice at all; that's a unilateral decision taken by a quasi-judicial board appointed by political parties that is totally anti-democratic.

The question is, my friend, who should be allowed to make a decision—

*Interjections.*

**The Speaker (Hon Gary Carr):** Would the member take his seat. Order. The member asked a very good question in a forceful manner, and I must say that's the type of debate—he asked a very forceful question. The entire House was quiet while he asked it. Now it's the Minister of Labour's turn to answer, and I'd appreciate it if you would let him answer.

Minister of Labour.

**Hon Mr Stockwell:** Finally, the simple fact is, I believe workers should have the right to make up their own minds to certify or not certify. I don't believe I have a place in determining that they should automatically or not automatically be certified.

*Interjection.*

**The Speaker:** Order. Last warning to the member. We can't have him shouting across. As I said earlier, he asked a very tough question, a very good question. This entire House was quiet while he asked it because of the manner in which he did it. It was excellent. But now it's the minister's time to reply, and if he interferes one more time I'm going to have to name him. It's as simple as that.

Minister of Labour.

**Hon Mr Stockwell:** Finally, the question is: Do you believe in the democratic process? On this side of the House we believe in secret ballots for certifications and the decision by the workers—

**The Speaker:** Order. New question.

### HARASSMENT AND DISCRIMINATION POLICIES

**Mr Alvin Curling (Scarborough-Rouge River):** I have a question for the Minister of Correctional Services. There are over five reports that were issued to your ministry that gave specific recommendations and directions to address the remedy of systemic discrimination and



harassment within your ministry. What have you done to date to implement those recommendations?

**Hon Rob Sampson (Minister of Correctional Services):** Our government is committed to a work environment that is free of discrimination and harassment, and that's why we take complaints of this nature quite seriously. Our response has been that we established and implemented a systematic change program in June 1995, just after we were elected, to safeguard human rights and the dignity of all staff in our ministry, to endorse fairness and equitable treatment and open communication, and to promote a harassment-free workplace. That's in fact what we did, and we did that just after we were elected.

**Mr Curling:** The minister read it from his book and his bureaucrats told him that. Let me tell him the reality.

What has happened, Minister, is that you have failed miserably in that direction. With us today we have three employees who continue to be victimized by this poisoned environment of discrimination and harassment. The only way we can effectively do what you're talking about is to have a public inquiry into all this, because with all those recommendations that you have shoved under, nothing has been done. People have continued to be harassed and to be discriminated against. Would you today reassure me that you will have a public inquiry into this matter?

**Hon Mr Sampson:** The honourable member is asking for a process to deal with issues of discrimination and complaints of discrimination, and there is indeed a process to deal with that. There is a series of processes to deal with that.

He knows full well that I cannot speak to the incidents and the issues he is raising in this House about particular matters relating to a particular case. He knows I can't speak about that. I would encourage him not to suggest anything other than that.

There is a process to deal with situations where employees feel they've been discriminated against or harassed, and that process is underway. It was established a number of years ago, and we are following that process. It's very well outlined in any ministry guideline, as you know, and we are following that process, as we should.

## VOLUNTEERS

**Mr R. Gary Stewart (Peterborough):** My question is for the Minister of Citizenship, Culture and Recreation. We all know that strong communities are built through volunteering. From health care to social services, from charity work to minor sports, volunteers have a tremendous impact on our society. In Ontario, volunteers give 353 million hours of their time each year to more than 64,000 organizations. The number and scope of volunteers' activities that go on every day across Ontario continually impresses me.

Minister, can you inform the House about your ministry's celebration of National Volunteer Week.

**Hon Helen Johns (Minister of Citizenship, Culture and Recreation, minister responsible for seniors and women):** I'd like to say first of all to the member for Peterborough that I know every member in this House does a lot of volunteering in their communities and I know everyone is interested in enriching our communities by recognizing volunteers. So let me remind everyone here that next week, April 9 to 16, is volunteer week in Ontario.

I think this is a time when each of us should be thanking the volunteers in our community for the terrific work they do, not only in the political sphere, but of course in a number of charitable organizations that make our community a better place to live.

One of the events that the ministry is sponsoring next week is the Ontario Medal for Young Volunteers. This is an important volunteer celebration. It's happening right here at Queen's Park on April 11. We're recognizing youth between the ages of 15 and 24—

**The Speaker (Hon Gary Carr):** I'm afraid the minister's time is up. Supplementary.

**Mr Stewart:** Next week in my riding of Peterborough, several events have been planned to acknowledge the work of our volunteers at places such as the canoe museum and at Kinart Child and Family Services, where approximately 80 volunteers will be recognized with special awards.

The dedication of volunteers promotes community spirit and enhances our quality of life. Whether it is coaching little league, helping to renovate a local museum or building a playground in their neighbourhood, volunteers truly make a difference.

Minister, how would a volunteer become eligible for next year's awards?

**Hon Mrs Johns:** We have two sets of awards, both the Ontario Medal for Young Volunteers and the Ontario volunteer service awards. For people between the ages of 15 and 24, they can apply if they've done a great deal of volunteer work. We take nominations starting right now for next year. In the week of National Volunteer Week, the Lieutenant Governor presents those awards and recognizes outstanding behaviour and outstanding contributions in our community.

Let's all of us stop next week and thank the volunteers in our communities, who do a terrific job to enrich our communities and the province of Ontario.

## ACADEMIC CREDENTIALS

**Mr Tony Ruprecht (Davenport):** I have a question to the Minister of Training, Colleges and Universities. A few days before the Legislature opened, Minister, you made a clandestine announcement that you gave the contract for our academic credential assessment service to a New York company. You knew that the academic credentials are being assessed right now by U of T, York University and the Toronto Board of Education. You can download that information from the Internet. Why would you give this contract to a New York company and not

give it to one of our own Canadian services? Are your New York cousins better than we are?

1440

**Hon Dianne Cunningham (Minister of Training, Colleges and Universities):** It is correct that the Ontario government has signed an agreement to set up an academic credential assessment service. This is long overdue. It has probably been 10 years in the waiting. We were very careful how we went about, over a long period of time, making this decision. The service will assess the foreign secondary and post-secondary education qualifications against Ontario standards. You should know that we went through a process. We did have people respond to a call for proposals. It was determined by an independent body that we should make the decision that we made. In fact, the decision that we made was the company that is being referred to today, a company that met the requirements through a fair and open process.

**Mr Ruprecht:** You have to make the decision and finally you're responsible for it, but you also know that we have literally thousands of newcomers who are doctors, technicians, scientists, who are told before they immigrate to Toronto or indeed to Canada that, "Yes, you will have no problem practising your profession in Ontario." That's what they're being told. Once they get here, they've found that the only way to make a living is either to drive a taxi, deliver pizza or clean a restaurant. What a waste, Minister. You know that.

You promised six years ago that foreign-trained professionals would get quick entry into professional life. Is this your response, to hire a New York company? Can you promise today that your program will bring at least one doctor to our community? Will you give this House assurances today that within three months you'll come in here and give us at least one name of a doctor who through this program is accepted into our community?

**Hon Mrs Cunningham:** I think the member opposite knows that everyone benefits when skilled newcomers who come to this province can in fact quickly enter the labour force. This has not been happening, so we had to do something about it. In fact, the service that you're talking about today, getting information out around the world to people who are considering coming to Canada, is simply that we now do have an assessment service. The contract was awarded to World Education Services. The member opposite knows that this is a not-for-profit agency, that in fact it has a track record for providing quality services on a scale around the world. This is something we're looking forward to. The citizen he is talking about—

**The Speaker (Hon Gary Carr):** I'm afraid the minister's time is up.

#### BUILDING REGULATION

**Mrs Julia Munro (York North):** My question today is for the Minister of Municipal Affairs and Housing. There are many concerns in my riding about the standard of our buildings. My constituents are concerned about the

public safety and quality of construction. Could you please tell me and the House today any information about what standards exist for building?

**Hon Tony Clement (Minister of Municipal Affairs and Housing):** I thank the member for York North for this question. I can inform her and the House that just recently our government established an advisory committee called the Building Regulatory Reform Advisory Group, or BRRAG for short, to prepare a report and recommendations with several objectives: to improve public safety, to streamline delivery of building-related inspection and review services, to improve the construction liability regime and to streamline code administration, appeal and dispute resolution mechanisms. It will be addressing several recommendations from the Red Tape Commission, which consulted with stakeholders in the spring of 1998 and reflected this in the commission's report of July 1998. In that approach we are going to have a new vision for building regulation. There will be representation from various sectors, and I hope to be receiving this report this summer.

**Mrs Munro:** It appears our government is taking a serious look at this issue and moving on finding a solution. Could you please tell me who will sit on this committee and what sectors will be represented?

**Hon Mr Clement:** I can tell the honourable member that the committee hasn't been fully established yet, but I am pleased to inform the House that I've appointed my parliamentary assistant, Brian Coburn, the member for Carleton-Gloucester, I should say, to be the BRRAG chair. He is the chair of BRRAG. A gentleman by the name of Richard Lyall, who is the general manager of the Metropolitan Toronto Apartment Builders Association, and Rocky Cerminara, who is the chief building official from London, have been appointed as vice-chairs. And there will be 18 other members of the committee who will represent various sectors, including the builders and contractors, the design professionals, the consumer associations, the building owners, the building officials, the municipalities and, of course, the affected ministries. The whole idea here is to get everybody together who wants to see improvements in regulatory reform and who wants to see a better regime for building in Ontario, because that is so important to the future of our—

**The Speaker (Hon Gary Carr):** I'm afraid the minister's time is up.

#### AFFORDABLE HOUSING

**Mr Rosario Marchese (Trinity-Spadina):** My question is to the Minister of Housing, and I'm going to keep my first question short to get to the second one.

Minister, today your government voted down my private member's bill that would have given municipalities the power to stop demolitions. Over 1,500 Toronto households are at risk because you believe in the right of landlords to make maximum profit instead of the right of tenants to a decent home. Why won't you at least



give the municipalities the power to stop demolitions? Why don't you trust them with such power?

**Hon Tony Clement (Minister of Municipal Affairs and Housing):** As the honourable member knows, when this government came to power it was clear that we had to do something to immediately fix the rental housing supply problem that we had inherited from the honourable member. The previous system, under the NDP and Liberal governments, was ineffective. There was red tape, there was no incentive to build new housing projects, and in fact by 1995 a study concluded that serious barriers had been put up by governments over the past decade: rigid rent controls, harmful tax policies and cumbersome land use planning processes. All of that meant new affordable housing was not being built. Instead of fixing the problem, the governments of the day always went to the taxpayer for more money, throwing more good money after bad. We have changed that, and it is improving the situation as we speak.

**Mr Marchese:** I can take my time with my supplementary, the allotted time, Speaker.

**Hon Ernie Hardeman (Minister of Agriculture, Food and Rural Affairs):** Get it over with.

*Interjections.*

**Mr Marchese:** Please. You're taking my time.

**The Speaker (Hon Gary Carr):** Please take your seat.

Question period isn't over. There is one more supplementary. If you can bear with us, the member has an important question on behalf of his constituents. He would like to place it without the talking going on. Would the member continue.

**Mr Marchese:** Minister, on Tuesday, March 28, you spoke to a gathering of developers, your buddies, and you literally whined and pleaded with them about the need to build affordable housing. I guess you were the last one to know that your strategy doesn't work, because we told you in opposition, in the hearings, that the private sector wouldn't build affordable rental housing unless you greased the wheels with more incentives. The developers themselves told you they couldn't build anything for less than \$1,400 a month. But you and Al Leach were in some kind of trance, chanting, "They will build, they will build," and you are pleading with them today to build, because otherwise you are going to look real bad.

The choice is clear. If you want affordable housing, you've got to put up the cash. Are you going to do it or are you going to ignore all the evidence and stick to your failed plan?

**Hon Mr Clement:** With the greatest of respect to the honourable member, we do not need tired old rhetoric with tired old solutions. We need new solutions. The old way of spend and tax, tax and spend, meant that we were building so-called affordable housing at up to \$160,000 per unit cost. That was the legacy of the former government.

We are saying: "Help the tenants. Don't get into the housing business, don't get into the bricks and mortar business; get into the helping-the-tenant-who-needs-help

business." That is why, with the recent federal-provincial housing agreement, we have said that \$50 million extra money is going into rent geared to income, going to help the tenants. Up to 10,000 families are going to be helped by that one very decision, and there is more to come. I can assure the honourable member of that.

1450

## PETITIONS

### TENANT PROTECTION

**Mr Mario Sergio (York West):** I have a petition to the Legislative Assembly of Ontario which I would like to read. It says:

"Whereas the current rental housing legislation in Ontario, the Tenant Protection Act, is unfair and does not serve the interests of tenants;

"Whereas tenants are being victimized by landlords who are securing excessive rent increases and not providing adequate services;

"Whereas the Ontario Rental Housing Tribunal unfairly favours the interests of landlords;

"We, the residents of 2405 Finch Avenue West (Lori Gardens Tenants Association) petition the Legislative Assembly of Ontario as follows:

"We urge the Ontario government to replace the Tenant Protection Act with legislation that protects the rights of tenants and ensures a fair balance between them and their landlords."

I concur with the intent of the petition and I will affix my signature to it.

### ACCESS TO CHILDREN IN CUSTODY

**Mr John Hastings (Etobicoke North):** Many constituents in my riding and throughout the province of Ontario have signed this petition and it is addressed as follows:

"To the Legislative Assembly of Ontario:

"We, the undersigned, petition the Legislature of Ontario as follows:

"We support Bill 27 as it emphasizes the primary importance of children's relationships with their grandparents."

I so sign this petition.

### GASOLINE PRICES

**Mr Steve Peters (Elgin-Middlesex-London):** I have a petition to the Legislature of Ontario.

"Whereas the price of gasoline has soared over 30% in the past six months; and

"Whereas the Mike Harris government has done nothing to protect consumers and is afraid to take on the big oil companies; and

"Whereas the wholesale market for gasoline is controlled by an oil oligopoly which controls 85% of the wholesale market; and

"Whereas the big oil companies have used predatory pricing to eliminate small competitors; and

"Whereas, in 1975, former Ontario Premier Bill Davis froze the price of gasoline for 135 days and called an inquiry into the pricing practices of oil companies;

"We, the undersigned, petition the Legislature of Ontario as follows:

"That the province of Ontario call for a 90-day freeze on the price of gasoline while an inquiry is held into the pricing practices of large oil companies, and that the province pass into law the Gas Price Watchdog Act, which would protect consumers and independent oil companies from price gouging and predatory pricing."

I agree with these comments and I have affixed my signature to the petition.

#### KARLA HOMOLKA

**Ms Marilyn Mushinski (Scarborough Centre):** I have a petition addressed to the Legislative Assembly of Ontario that reads as follows:

"Whereas Karla Homolka and Paul Bernardo were responsible for terrorizing entire communities in southern Ontario; and

"Whereas the Ontario government of the day made a deal with the devil with Karla Homolka, resulting in a sentence that does not truly make her pay for her crimes; and

"Whereas our communities have not yet fully recovered from the trauma and sadness caused by Karla Homolka; and

"Whereas Karla Homolka believes that she should be entitled to pass to leave prison with an escort; and

"Whereas the people of Ontario believe that criminals should be forced to serve sentences that reflect the seriousness of their crimes;

"Therefore we, the undersigned, respectfully petition the Legislative Assembly of Ontario as follows:

"That the government of Ontario will:

"Do everything within its power to ensure that Karla Homolka serves her full sentence;

"Continue to reform parole and make it more difficult for serious offenders to return to our streets;

"Fight the federal government's plan to release up to 1,600 more convicted criminals on to Ontario streets; and

"Ensure that the Ontario government's sex offender registry is functioning as quickly as possible."

I am pleased to have affixed my signature to this petition.

#### ONTARIANS WITH DISABILITIES LEGISLATION

**Mr Steve Peters (Elgin-Middlesex-London):** I have a petition that's been approved by the table.

"To the Legislature of Ontario:

"Whereas Mike Harris promised an Ontarians with Disabilities Act during the 1995 election and renewed that commitment in 1997 but has yet to make good on that promise; and

"Whereas the Harris government has not committed to holding open consultations with the various stakeholders and individuals on the ODA; and

"Whereas Helen Johns, the minister responsible for persons with disabilities, will not commit to the 11 principles outlined by the ODA committee; and

"Whereas the vast majority of Ontario citizens believe there should be an Ontarians with Disabilities Act to remove the barriers facing the 1.5 million persons with disabilities;

"We, the undersigned, petition the Legislature of Ontario as follows:

"To pass a strong and effective Ontarians with Disabilities Act that would remove the barriers facing the 1.5 million persons with disabilities in this province."

I agree with this petition and have affixed my signature hereto.

#### PROTECTION OF MINORS

**Mr John O'Toole (Durham):** I'm pleased to present a petition on behalf of the constituents of the riding of Durham, specifically Maria Speziale, Denis Radcliffe and Father Randy Foster, to name but three.

"To the Legislative Assembly of Ontario:

"Whereas children are exposed to sexually explicit material in variety stores and video rental outlets;

"Whereas bylaws vary from city to city and have failed to protect minors from unwanted exposure to sexually explicit materials;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"To enact legislation which will:

"Create uniform standards in Ontario to prevent minors from being exposed to sexually explicit material in retail establishments;

"Make it illegal to sell, rent or loan sexually explicit materials to minors."

I'm pleased to support this and sign the petition.

#### ORDERS OF THE DAY

##### HEALTH CARE FUNDING

Resuming the debate adjourned on April 4, 2000, on the amendment to the amendment to the motion by Mr Harris relating to health care funding.

**Ms Frances Lankin (Beaches-East York):** I'm pleased to have the opportunity to rise to continue debate. I had an opportunity in starting off, on behalf of our caucus, to outline some of the concerns I had with the tenor of the discussion that had been taking place thus far in the House.



I indicated our support for the Premier's resolution calling on the federal government to restore transfer payments to the provinces with respect to health care. I indicated that I thought the federal government needed to be there in order to regain both its moral authority and its fiscal clout to enforce the principles of the Canada Health Act.

I also indicated that I felt that doesn't go far enough, that it is time in this country that we bring to the table a debate about broadening the Canada Health Act. As we see the very nature of health care services in all the provinces change through reform and restructuring, as we see more services being delivered after patients are being discharged from hospital, more services being delivered outside doctors' offices, we see those services delivered in a manner and in locations that are not covered under the principles and guarantees of the Canada Health Act. It is time for us to challenge the federal government to truly bring about national standards and national principles that cover the entire gamut of what we view as our health services within the provincial jurisdictions.

I also indicated that I thought the gamesmanship of a provincial government saying, "We will perhaps delist more services unless we get this money," "We won't move forward in certain areas unless we get this money," or "We will continue to privatize our services and look for private investment unless we get this money from the federal government," contrasted with the federal government saying, "We won't give the money unless we get a guarantee that every cent of it is in addition to what has been budgeted for and projected in the future and that none of it goes to other resources within the government," is not serving the public of this province, and in fact of this country, well with respect to the reforms we need to see in order to preserve our public health care system.

I also indicated that a consensus had been arrived at in this country about the reforms that were needed to preserve medicare, that I believed the content of that consensus, which had been arrived at with governments of all political stripes in the early 1990s, stood in good stead today and still was an appropriate road map for us to follow. I want to spend some time talking about the elements of that and contrasting it with what I actually see happening in Ontario, and then hopefully set out a suggested road for the future.

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I also want to indicate that we have placed on the floor an amendment, in addition to our support for the Premier's resolution, calling on the federal government to take action in terms of fair funding of health care, an amendment that addresses the provincial government role, and asking for the adoption of four specific principles at this point in time, those principles being a ban on the Ralph Klein style of private, for-profit hospitals, a freeze on further delisting of health services under OHIP, an end to the proliferation of private, for-profit long-term care and home care services and a tougher inspection system and stiffer penalties for independent health facilities.

I will have an opportunity, over the course of the remainder of my address today, to speak specifically to the amendment to the resolution and to why we believe those are important measures to be taken today in order to preserve enough of our health care system to maintain medicare while we work on the federal level to ensure that the Canada Health Act is amended to bring various aspects of the health system under the protection for the principles contained therein.

The ministers of health from the provincial and federal governments who met in the early 1990s saw ever-escalating health care budgets at a time when we knew the population was continuing to grow and to age, and that we would be facing a tremendous expenditure down the road as we dealt with that growing and aging population. Those ministers of health struggled to find a way to contain growth and health care spending at the time to preserve the essential qualities of public health care.

There was a multilateral, multiparty agreement that Canadians cherished medicare and public health care and that Canadians did not want to see us go the way of Americanized two-tier health care. I believe the Canadian sentiment remains today. What I fear is that the consensus among political parties has been lost. I see evidence of that in actions that have been taken, for example, in the province of Alberta, with the proposal for the new private, for-profit hospital that would have overnight stays and deal with surgical procedures. It would be similar to hospitals that exist in jurisdictions like the United States and Australia. I see evidence of that in the province of Ontario, where provisions that had been put in place in the past to limit the growth of private, for-profit services in the delivery of home care services, homemaking services, nursing home long-term care facilities, have been repealed by the current government. In fact, we have moved to a competitive bidding system, which has ensured that the vast majority of the expansion of those services has in fact gone to the private, for-profit sector.

I see a willingness on the part of the government, as evidenced by action already and by rumours of intended action through the OMA negotiations, to further delist medically necessary services under OHIP, meaning that people will be paying for more services out of their own pockets. All of that combined is evidence of a backdoor privatization of the health care system. There may not be a bill in the Legislature to focus the debate, as there is in Alberta, but rest assured that day after day, more of our health care in this province is being delivered by the private, for-profit sector, I believe, directly contrary to the wishes of most Ontarians and in fact most Canadians who want to see medicare and public health care preserved.

I recently sent a letter out to constituents on a mailing list within my riding who had indicated an interest in issues of health care in the past. I talked about the re-emerging debate about public versus private, about whether medicare is sustainable. I talked about the consensus that had been arrived at in the past by politicians

of all stripes on the advice of many people like health economists, medical reformers and others who put a great deal of time, thought and energy into putting forward constructive suggestions to ministers of health and those suggestions which had been adopted.

I was absolutely amazed at the level of response I got to the letter I sent out. MPPs will know that when you send out materials in your riding, there will always be some people who will take the time to contact you by phone or by letter or by e-mail to let you know what they think, and we always appreciate that feedback. It is usually a relatively small number of people who take the opportunity to communicate back to you. Most people will receive the information, review it and make up their own mind about what you had to say about what you provided to them.

Within a few hours of the first of those letters hitting mailboxes within the riding, the phones started to ring at my constituency office. People who had read the letter started to call and express their desire for us to continue the fight to preserve public health care. By that evening and over the next day, the e-mails started to come, and they continued over the period of a week. Over the course of the first week I had some 45 e-mails, and then in the second week another 30 to 40 e-mails came in. The letters started to come after that, and the phone calls continued. I have never had a response quite like that and, as I stand today, we are still receiving communications from the public. All but one of those responses wholeheartedly endorsed the public medicare system and called on politicians of all stripes to stop the finger pointing, to stop the wrangling, to get in there and make the changes necessary to ensure that that system is there for us to pass on to our children.

I think it's worthwhile to review in a very abbreviated fashion some of the elements of the road map to reform of sustainable medicare that have been identified and agreed upon in the past. We often talk about the need to understand our system of insured services under medicare, currently best described as an illness treatment system.

Tommy Douglas, the founder of medicare, who fashioned the way in Saskatchewan when he was Premier of Saskatchewan and then went on as a representative to the Parliament of Canada on behalf of the people of Saskatchewan to bring and forge a consensus in the national Parliament to make what was then an insurance system in the province of Saskatchewan a national medicare program, often talked about the universality of insurance for doctors' services and hospital services being just the first step. The second step was for us to move out into the community, to bring services to people in the community and to focus on health promotion, on well-being, on illness prevention, to have a system of community clinics accessible to people where a range of health services would be there and available under the provisions of medicare, of public health care. That vision still stands unfulfilled today. But he was right then and his vision is right today.

The consensus that has been built is that we need to transform our system from an illness treatment system to an illness prevention system. We need to focus as much of our resources on health promotion, on preventing people from going down the road of becoming ill, as we do on treating them when they do become ill. We need to understand the role of the determinants of health. It's not simply what we pay for in our doctors' offices and our hospitals that builds a healthy community, healthy public, healthy people. We need to understand that investment in adequate housing for people, investment to ensure our kids are getting proper nutrition, investment to ensure that families are not living in abject poverty, investment to ensure that we have tough environmental regulations and tough enforcement of those regulations so that we have clean water to drink and clean air to breathe, investments in an education system that give all kids the resources they need to have an equal chance at winning in this world—all of those things that we build the strong, healthy communities, the neighbourhoods, the networks on—are what make people healthy, and the absence of those things makes people sick.

I have to again comment on the fact that while the Minister of Health purports to support health care reform, purports to talk about having services available to people as close as possible to their home and to focus on health promotion, this is the government that immediately upon being elected slashed social assistance rates so that the poorest of our community are even poorer; slashed environmental regulations and environmental enforcement so that we have more toxins in our air, more pollutants in our water system; slashed, cut, abolished all affordable housing programs in this province so that there are more people living in shelters and more people living on the streets.

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In so many areas of the determinants of health this government has gone in the direct opposite direction of what the national consensus had been that governments needed to do to invest in healthy populations. The short-sightedness of it is that we will in fact spend those resources, we will spend those dollars, but we will spend them in the health care system and many other aspects of our social welfare and justice systems. We will spend those dollars treating the problems that we in fact could have prevented.

Along with this notion of shifting from illness treatment to illness prevention, there is a consensus that we needed to shift from institutionalized-based services to broader-range community services; that we needed to take the budgets, which were in the early 1990s in all provinces under tremendous strain as this country and most particularly this province suffered the greatest recession since the Great Depression, that we needed to take that envelope of funding and within that we needed to see a change from ever-escalating drug benefit programs, OHIP billings, through the medical profession and services in hospitals and hospital budgets. We needed to contain the growth in that area and needed to see massive



expansion in community services through primary care reform, community health clinics and various other models where people access their first service in terms of health care, community and social support services, home care and long-term-care facilities.

We needed to understand that as we, with technology and pharmacology, could do things differently in our hospitals, treat more people on an ambulatory care basis, for example, the resources that had gone into supporting hospital beds at that point in time needed to be shifted within the hospital budget to support these other areas and other methods of treating people. We needed to understand that primary care reform meant challenging the long-standing practice of medical doctors as the gatekeepers to our health care system and of their method of payment from the provinces, that being the fee-for-service system.

As most people will know, when they go to see their doctor, the visit and whatever procedures and tests are ordered and whatever other treatment flows from that is billed back to the province under billing codes for the particular service that was provided. They receive a fee for each service they provide. I'm talking very particularly about family medicine; I'm not talking about issues of specialists and surgical specialists and other fields of medicine. In the area of family medicine, the irony in the fee-for-service system is that those doctors who provide the very best quality care for their patients, who spend the time to do health education, who work on health promotion, who bring in other health professionals—because what the patient may need is not to see a medical doctor, it may be the patient needs chiropody services or social services or a nurse practitioner's services, a range of other health care professionals. Family practitioners who do perform or do operate their services in that way get paid the least under the fee-for-service system, because it takes time, it takes energy and commitment, it takes sharing the pool of money with other health care professionals. They get paid the least.

I am by no means suggesting that there aren't many very good family doctors out there, but we all do know there are also some bad ones. Those who practise the worst of family medicine, often referred to as "revolving-door medicine," where patients come in and are seen for five minutes and there are four other patients in other waiting rooms and it's boom, boom, boom, and over the course of the day 80 patients have been seen, and they're sent for tests and called back to get their test results when it could have been a simple phone call, on and on and on, those who practise the absolute worst medicine, get paid the most in this system, because it's on a fee-for-service basis.

Surely everyone in this Legislature, irrespective of political stripe, can see not only the irony but the folly in that system, that there needs to be a rethinking. That rethinking has been taking place for a long time. For over 15 years in this province, we have had experiments with alternate forms of delivery of family medicine and family health care. We have seen community health centres—

the minister stood and said proudly that they had added three new community centres since they've been in government. I remember that when I was Minister of Health, I alone approved over 20 new community health centres. While my successor, Ruth Grier, approved a number more and made announcements for five more just prior to the election of the Harris government, only three of those five that had been budgeted for—although the sites had not been chosen yet, the process for selection was underway—have now been announced, six years later.

Community health centres are a way of organizing delivery of health services in an alternative to fee-for-service. They are funded under a global budget. They are funded for programs that they offer. They could be health babies-healthy mothers programs, chiropody programs, social supports to seniors—a range. The thing that's really wonderful about community health centres is that they work hard to meet the population health needs of the community they serve, and they put forward their request for program funding based on the needs of the population they serve.

Community health centres have a range of health care professionals working there. When a person comes in, they are triaged to see the appropriate health professional. It doesn't start with a visit to the doctor and go on from there. That's one model of primary care that's already out there.

Another model is health service organizations. Health service organizations are much like what people talk about in terms of primary care reform, in that they are compensated on a basis called capitation, where patients enrol and enlist and become members of a particular clinic, and then government transfers money on a capitated basis, per capita, per person who has enrolled. The thought there was that while it was slightly different from the way of funding community health centres, the goal would be the same: that the work within that clinic wouldn't depend on just treatments and billings for services, but that the money, being there, could be used to work on health promotion and preventing people from becoming ill. In fact, there was also a provision called the ambulatory care incentive program, ACIP, that was attached to health service organizations. This was a bonus if that practice was able to keep a percentage—the bonus would depend on however large the percentage what be—of their patient clientele out of hospitals, out of using emergency and other hospital services, if they were able to keep their patients healthy.

It was a very good idea. I have to say, though, as with all of these things, they need to be reviewed and fine-tuned. What I found when I was Minister of Health was that a problem arose under the HSO system. It wasn't mandated that it had to be a group practice, and so a number of HSOs were established that were sole-practitioner practices—individual doctors, not a group of doctors, and not with other health professionals. In fact, there was no limitation on where the HSO could be established, and we began to see a trend of a number of solo practices being established in very well-to-do, high

socioeconomic communities. One of the factors we do know is that income, economic well-being of families, related very closely to their health well-being. Members of families that live in poverty have a lot more health problems, and families that have higher socioeconomic status tend to use the health services less.

So what happened, in a very bizarre way, under what was really a good intent, was that these sole-practitioner practices in very high socioeconomic neighbourhoods who spent none of the money on doing outreach programs, health education programs, health promotion programs, who just operated like any other doctor's office, were receiving huge bonuses because the general health status of the population they serve and not related necessarily to any actions of that clinic. The general health status tended to be high.

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We put a freeze on expansion of HSOs at that time because we were worried that it wasn't quite getting it right and that we needed to fix that problem. At the same time we established the primary care reform working group. This is where I get so annoyed when I listen to the Minister of Health that no work had ever been done before on this. They point across: "You had five years in government. Why didn't you do it?" Well, let me tell you, during a period of time of tremendous fiscal restraint, we flatlined hospital funding, brought down doctors' fees through OHIP, and the Ontario drug plan increased only minimally. There were huge expansions in delivery of community services and a large number of new community health centres added. While the freeze went on HSOs, we continued to work on another model, CHOs, comprehensive health organizations—and there are a few of them in the north and worthy of evaluation—and continued to support organizations like the Sault Ste Marie Group Health Centre, which is renowned in terms of a model for group practice and multidisciplinary practice in serving the population needs of the community, and pre-existed any government's attempt to look at primary care reform.

We set up the primary care working group and brought all of the players to the table; not just the Ontario Medical Association, but the doctors, the nurses' organizations, the community health centres, the HSOs, and the other alternative payment plans that had been put in place in other parts of the province. We truly wanted to build that consensus, and at the same time we knew that we were going to have to drive that through the process of negotiations with the doctors as well as with other health professionals.

At the negotiating table, for a number of reasons, in order to free up money in an ever-growing OHIP pool to redirect into community services and primary care reform and long-term care and home care, which I'll talk about in a minute, we moved to put a cap on the overall billing. We knew with that cap there, we also would have the ability in negotiations with the doctors to talk about serious reform of the system.

Again I have to say that when Mike Harris first sent his health minister to the table to negotiate, they got

wrestled to the ceiling, as the saying goes, when we talk about negotiations with the doctors. They did away with the cap and they also agreed that any money that would go into paying for alternative payment practices like primary care reform would come from outside that OHIP pool of money. Talk about giving away the store; not just giving away the store, but talk about making it nearly impossible for a government to proceed in a meaningful way on primary care reform.

That's what we see in this round of negotiations—much talk, much ballyhoo about primary care reform and the government's commitment to it—the bottom line being that both the Premier and the Minister of Health have said on a number of occasions: "It will be voluntary. We're doing what we've always done. We have five, now seven. Congratulate us. We've moved it to seven pilot projects." There are already some 50-odd community health centre pilot projects, three comprehensive health organization pilot projects, the Group Health Centre in Sault Ste Marie, umpteen numbers of HSOs, and they have seven to point to? This is the new revolutionary world of primary care reform? The minister in her statement to the House said that she told Mr Rock about their plan to expand primary care reform. She didn't say that they're planning to do it at a snail's pace, which appears to be the case.

In the consensus that had been arrived at, we also understood the need to use a multidisciplinary team of health professionals. The minister stood and said they were the first government to bring in nurse practitioners. Wrong again. Nurse practitioners have existed in this province in the past. In fact, at a certain point in time the health nurse practitioner training program disappeared in this province, so we weren't producing any more nurse practitioners. It was back in 1993 that the Rae government took the decision to budget for the next year to reinstate nurse practitioner training programs. So the nurse practitioners who are now, six years after Harris took government, beginning to be funded for their services through various community clinics and other locations are only there because of the training programs that were reinstated. This government committed at the beginning of its term to establish nurse practitioners. It took six years before the first funding actually went out to any organization to hire those nurse practitioners, six years from announcement to realization.

Again, referring to the consensus, we also understood the challenge of a rapidly aging population as the baby boomers start to hit their forties and begin to have more health problems. I hadn't been in a hospital all of my life—I think once when I was a baby with a problem and then never again—and you know what? In the last year and a half I've had about five minor and major operations. I don't know; you hit 45 and it's all downhill from there on, I guess.

*Interjections.*

**Ms Lankin:** Some of you who are younger are fearing that, I can tell. It's coming. You just wait.

But the fact of the matter is, and the minister referred to this herself, that about 40% to 50% of our budget in



health is currently expended on about 12% of the population, those who are the most elderly. It does make sense, doesn't it, that as we age—as we get much older than me—our health does tend to fail and there are more interventions and more experiences with the health care system. Of course, there are many statistics about how much of the health care system is spent in the last six weeks of people's lives, but again that makes sense, because if at the end of it a person has in fact died and it happens to be through an illness or through a trauma or accident, there would be an extensive use of resources at that point in time. So that's not a surprising statistic.

But surely we should understand that with that baby boomer generation as it comes along and it reaches into the senior years, there will be tremendous demands on the system. I just can't understand why, from what I see happening, this government doesn't seem to acknowledge this. We know that if we put the right supports in the community for seniors in their homes, the vast majority of seniors can be helped to live at home with health and dignity and not have to take that step of institutionalization. But without those supports they can't remain independent and in their homes, and they end up needing to go into nursing homes, where it is much more difficult to provide the quality of life that we would want the senior members of our society to enjoy, and it is much more expensive to provide the accommodations and the services there. Why don't we wake up and get this right, what we need in place in our communities: the community supports, the social supports, the crisis intervention, the long-term-care supports for people?

We hear in the minister's statement that she told Minister Rock that they have a plan where they're expanding home care for Ontario citizens and that they've increased funding to this support program by 43%. I went back and took a look, and during the Rae government, again at a time when we were in the biggest recession since the Great Depression and with the fiscal challenges facing the government, something this government never had to contemplate at all, we increased spending in long-term care by an equal amount over a five-year period. We're talking six years for this government. Not only have the resources that have gone out there been organized in a different way, being delivered more and more by private, for-profit services, but because of the restructuring of hospitals and the way it has been done, because of the cuts to hospital budgets which have forced hospitals to discharge patients sicker and quicker, and because of the regulations and the directions that the government put in place with respect to home care, that those sub-acute patients being discharged from hospitals get priority for the services, they've now gone on to put a maximum cap on the number of hours of home support services that people can get. So the seniors population, where we were trying to have massive expansion of home support and community support services to the seniors, is now getting less than they ever got before and more and more of them are unable to be maintained and supported in their own homes.

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Because there are no long-term-care bed facilities to go to—and that's another story in terms of how this government has delayed on that—they're ending up in unregulated retirement homes, and we hear horror stories all the time in terms of the inappropriate treatment of these citizens. These are citizens who have spent their lives contributing to build our communities, contributing tax dollars to these and predecessor governments, and we are failing them sorely.

But just think down the road, with the massive growth in the number of seniors that we know is coming. You know it's there. The demographics are clear. Just think what the problem is going to be. We would not need the new nursing home beds and long-term-care beds that this government is still announcing will be coming if they would put in place the appropriate home support services. I don't understand other than the short-sightedness of it. Think of the short-sightedness, because the other thing this minister said is that she supported reform of the system and she told Minister Rock all of what they've done in terms of hospital restructuring.

I remind you again, the consensus had been that we needed to expand community services, we needed to relocate services from hospitals to the community, and then we could restructure our hospitals and maintain budgets at a level to serve population needs in terms of what had to be done in the institutional sector.

What did this government do? They came to power, and they cut between \$600 million and \$800 million out of our hospital budgets before they restructured. They went in and created a restructuring commission and took away the work that was being done by local communities in arriving at local solutions to this. They forced the restructuring of the hospitals then after the money had been taken out and before they had invested in the communities.

They gave the restructuring commission a mandate to make orders with respect to hospital restructuring but did not give them a mandate to make orders with respect to community investments. So we see hospital budgets cut, hospitals restructured, lack of community investment, overcrowded emergency rooms, not enough beds for people, and now money being thrown back at the hospital sector because of crises of deficits, legitimate crises of deficits, but crises that this government started in the first place.

We see the OHIP pool of budget growing dramatically because of what they've done in negotiations with the doctors, and we see the lack of expansion of investment that is needed in the community sector and what is there being taken up by subacute patients being discharged earlier from hospital. Boy, did we get that wrong in this province. No wonder you've been able to re-engender the debate about "Is medicare sustainable?" We know what the road to sustaining medicare is. We have to question whether or not you in fact intend to do that.

The privatization of home care and long-term-care services came about as a direct result of your govern-

ment. The minister says that it's the same as it was under the NDP or under the Liberals. I can tell you as a former Minister of Health, in the Long-Term Care Act that we brought forward, which was finally passed in 1994, there was a limit on the proportion of any community's budget that could be spent on for-profit services. We recognized that some were already out there, and we weren't taking a step to drive them out of business, but we said that only 20% could be spent on for-profit services; 80% had to go to the not-for-profit sector.

This government eliminated that position, so do not tell me that it is the same as it was under previous governments. What we see now is that virtually 70% to 85% of all contracts being awarded—depending on whether you're talking the long-term-care nursing home beds sector or the home support sector—are going to the private for-profit sector, some of them to the most odious American companies with some of the worst records in terms of delivery of quality of care.

Our amendment, which absolutely puts a ban on bringing the private hospital system of the US and Australia here, the Ralph Klein system, is a first step to say we really mean it when we say we want to preserve public medicare. Our amendment to put a freeze on the delisting of health care puts an end to the rumour that if you don't get the money from the federal government, you're going to delist more services. How could you even begin to justify that at a time when the economy is growing and government revenues are growing, and you're not facing a revenue crisis of any sort? I suspect because it's on the table, the negotiations with the OMA. We want a freeze on delisting of health services, an end to the proliferation of private for-profit long-term care and home care. Bring back the 80-20 rule. Bring back a cap that stops any further expansion in the growth of those services by the for-profit sector.

We want to take the independent help facilities that we do have, where we have seen a growing number of complaints and inspectors noting problems with quality of care, and have tougher inspections and stiffer penalties. These provisions are contained within an act that will be brought before this House by my leader, the Tommy Douglas Act to preserve Medicare. We invoke his name because he is the father of medicare, the founder of medicare. His daughter, Shirley Douglas, is now criss-crossing this country in defence of preserving medicare.

I hear this government talk that they want to preserve medicare. I don't see the actions that match it.

We will support the resolution. We hope you will support our amendments. We hope you will give some truth to the words of the Premier and the minister that they believe in public quality health care.

**Ms Marilyn Mushinski (Scarborough Centre):** I will be splitting my time with the member for York North this afternoon.

It's my pleasure today to rise in the House to speak in favour of the resolution introduced by the Premier in the House on Monday.

I don't believe that you will find one member in this Legislature who does not understand the importance of a strong health care system in Ontario. We all believe that our constituents expect and deserve nothing but the finest health care system in the world. When 18,000 Scarborough Centre residents cast their ballots for me in June 1999, they didn't just do so as a rebuke of Sid Ryan and organized labour; they cast their ballots for me with the expectation that I would fight on their behalf on issues of critical importance, such as quality health care. My constituents expect me to work with my caucus colleagues, with local hospitals and caregivers and representatives from all levels of government to ensure that we have a reliable health care system.

Like the rest of the members in this House, I take this responsibility very seriously. That is why I strongly support the Premier's courageous stance on the federal government's refusal to properly fund public health care.

We are all aware of the numbers: Over \$4.7 billion slashed from health care transfers to the provinces; \$1.7 billion annually stripped from Ontario's health care system alone by Allan Rock, Jean Chrétien and the federal Liberals; a traditional 50-50 funding arrangement unilaterally altered by a federal Liberal government that lacks vision and the political guts to make tough decisions; a provincial Liberal opposition party with even less willpower and a leader whose vision changes more often than most of us change our socks. If the story of his political career were turned into a television series, it might well be entitled *As the Poll Turns*.

Recent history has seen the erosion of the federal government's contribution to health care funding and their commitment to the health and well-being of all Canadians. From the traditional 50-50 cost sharing arrangement, we have watched the federal government continually reduce their share of the cost, to the point where Mike Harris's Ontario government is now footing the bill for a full 89% of the cost of health care in this province. That leaves the federal Liberals to pay for a paltry 11% of the services that Ontario's aging population relies upon.

We in the Mike Harris government could have easily sat by and watched Allan Rock and Jean Chrétien walk away from their obligations to Canadians. That's exactly what the Ontario caucus of 101 Liberal sheep have done. After all, if the polls didn't show the importance of health care, that's exactly what Dalton McGuinty would well be doing today.

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We know that health care is too important to play that game. We have a duty to the people of Ontario. That is why we have made up for the failures of the federal Liberals. We have made up the \$1.7 billion that they cut annually from health care in Ontario. We've even gone one step further by increasing Ontario's health care budget by an additional \$3 billion a year. I have a sneaking suspicion also, Mr Speaker—some may call it a woman's intuition—that the Honourable Minister of Finance, Ernie Eves, will see fit to increase the health



care budget even more in the very near future. This is permanent funding, not a one-time payment that vanishes in non-election years like other governments have done, of course.

Look at our efforts in home care. We spend \$1.5 billion annually on home care and community care. Since 1994-95, funding for community services has increased by 49% and in-home services funding has increased by 56%. We are investing \$550 million to expand and enhance community services such as in-home nursing, therapy and homemaking, supportive housing, attendant outreach, and services for individuals with physical disabilities. To date, the Ministry of Health has announced over \$160 million for investment in community services. Now, Mr Speaker, that takes leadership. Sitting on the Hill in Ottawa and criticizing provincial governments who are forced to deal with their irrational health care cuts—that's irresponsible. Repackaging health care reform initiatives that provinces have been implementing for years and then trying to sell them to the public as their idea—that's Allan Rock/Dalton McGuinty style liberalism.

The best examples of our leadership can be seen in my own home riding of Scarborough. Our community care access centre has been one of the great success stories in recent years. The Scarborough Hospital, which is an amalgamation of the former Scarborough General Hospital and Scarborough Grace Hospital, has thrived with reinvestment after reinvestment.

I sat on the board of governors of the Scarborough General Hospital from 1985 to 1994. I saw ministers of health come and go. I remember the requests that we made to each successive minister. We asked, we begged, we pleaded for renal dialysis for nine years. We asked for magnetic resonance imaging. We asked for the capital to improve and upgrade the birthing centre, the emergency room and the critical care wing. We had the Liberals and Elinor Caplan in office for five years. We received nothing. We had the NDP and the honourable member for Beaches-East York and we received a very sympathetic, "I feel your pain" type of smile and, again, nothing.

Guess what? Since we came to office in 1995, the Scarborough General Hospital has received that long awaited renal dialysis unit. Just over a month ago, I was at the official opening, with my colleague the Honourable Dan Newman, of the MRI unit that the NDP told us not to hold our breath waiting for. Work on the birthing centre and emergency room improvements is underway. The funding for the critical care upgrade has been allocated and work should be underway shortly.

As an aside, I would like to recognize Ron Bodrug, Colonel Irene Strickland and the rest of the staff and administration at the Scarborough Hospital for all the hard work they have done and for all they have accomplished.

Our work in Ontario has made a difference as we build toward a health care system that will be able to accommodate the stresses and strains that will inevitably

be placed upon our health care infrastructure as baby boomers, including myself, age. As I look toward the future, I know the quality of the health care I receive as I age will be built upon the structure that we lay down today.

We could not afford to wait for the Liberals in Ottawa to give us direction, and we haven't. But the time has come for the federal government to participate in this process. The time has come for Allan Rock and his cohorts to become a real partner in the delivery of health care. The time has come for the federal government to return the \$4.2 billion they have taken from the provinces to allow us to put that money toward expanding primary care, community care, home care, long-term care, cardiac care, cancer treatment, improving emergency room services, the Trillium drug program, and the list goes on and on. In failing to restore the transfers even to the pre-1994/95 levels, the federal government is inhibiting our ability to provide the services that will enhance the lives of everyday Ontarians.

I am proud of the Premier and his courage to take a stand and fight Ottawa for the sake of quality health care. In fact, I will follow his lead right here, right now, and publicly demand that my federal counterpart, John Cannis, meet with me to discuss the future of health care for our Scarborough Centre constituents. When and if I have the opportunity to speak to Mr Cannis, I will let him know that I feel very passionately about our health care system and the role that each level of government must play. His government must once again become a significant and reliable player in the funding of health care.

The resolution put forth by the Premier and the recent media campaign are right on the mark. Ottawa has been getting a free ride on their embarrassing health care record. Unfortunately, the task of holding them accountable for their misdeeds has fallen to provincial governments across Canada.

I am proud to support this resolution and lend my voice to the chorus of provincial governments—of all political stripes, I might add—and everyday Canadians telling Ottawa that it's time they pay their fair share.

**Mrs Julia Munro (York North):** I rise in the House today in support of the motion put forward by Premier Harris, which calls on the government of Canada to immediately and permanently restore the health care funding of \$4.2 billion annually that it has cut since 1994-95.

I understand that the federal Minister of Health, Allan Rock, claims he would like to see some health care reform before he is willing to discuss restoring the billions that the federal government has cut to the provinces. We are here in the House today to tell Mr Rock that Ontario is well underway in health care reform, as is every other province in Canada.

Let me explain: primary care, for example. The Ontario Ministry of Health and Long-Term Care and the Ontario Medical Association first introduced primary care networks in four Ontario communities—Hamilton,

Paris, Chatham and the Kingston area—in May 1998. In September 1999, the primary care networks were introduced in three more communities: Ottawa, Parry Sound and Thunder Bay.

Primary care networks are made up of family doctors joining together in their communities to provide easier access to health services and better coordination of health information through computers. The networks will help reduce waste and duplication in the health system. About 200 family doctors will participate in the primary care network pilot projects across the seven communities, and nearly 400,000 Ontarians could eventually join or enrol with their family doctors as part of the new service model, which will provide 24-hour, seven-day-a-week access to health care.

1550

Some 100 family doctors in Hamilton and Paris, the first to inform their patients about the new way of providing medical care, are reporting that most of their patients have accepted their invitations to enrol by signing patient agreements. By signing the form, patients agree that their family doctor and their doctor's primary care network will look after their primary health care needs. Illness prevention, health education, diagnosis and treatment are all part of what family doctors do to provide their patients with health care. Primary care also includes family doctors making referrals to specialists. Referrals can also be made to another of the network's doctors who may have more expertise about the patient's condition.

Primary care networks are designed to offer convenient and quality service. Such services include that the patient's own doctor normally sees them during regular office hours; that the patient has access to a doctor in the network with extended office hours; after hours, on holidays and on weekends, patients can call a number provided by the network and speak to a registered nurse; the nurse may suggest ways for the patient to take care of that health concern, recommend that the patient make an appointment with his own doctor, or recommend that the patient go to an emergency room.

Health service is of a higher quality because there is better communication about the patient's health. The family doctor, nurse or other health care professional the patient deals with will keep his own family doctor informed about his own health problem.

If a patient speaks to the nurse staffing the after-hours phone service, his own family doctor will know about it the next day and may follow up to see how that patient is doing.

There is improved sharing of information about the patient's medical history or medications through computers, and this leads to better advice and treatment.

Patients do not give up their rights to second opinions and the power to decide when they are in an emergency situation requiring immediate hospital care. Patients can still choose other health care providers such as chiropractors, physiotherapists and dieticians, but may want to ask the family doctor to recommend someone with whom

they regularly work to help ensure continuity of their care.

It is the patient's choice whether they join their doctor's primary care network. There is no cost to join and it is easy to cancel an enrolment agreement.

Mr Rock, this is health care reform. The Ontario government has made great strides in the area of health care reform since elected in 1995. If Mr Rock is not satisfied with the levels of reform that have been presented to him on numerous occasions by our Minister of Health, the Honourable Elizabeth Witmer—and, I might add, from many other provincial ministers of health across Canada—then we might ask the question, what is Mr Rock's vision? Where is Mr Rock's vision? It is one thing to claim to be in favour of health care reform; it is quite another to offer a vision. He needs to take a look and see the examples of health care reform that have been taking place all over this country.

I am also very interested in what Mr McGuinty thinks of health care funding and what are his suggestions for so-called federal-style health care reform. Recently, Mr McGuinty and his Liberal caucus were meeting in the beautiful riding of York North and I sent him a letter asking him to join us in our quest to have the federal government restore health care funding to the provinces. In part, this is what I suggested:

"I understand that you are in retreat with your caucus at the Briers for the next two days, and would like to take this opportunity to welcome you and your members to the beautiful riding of York North, which I am privileged to represent.

"Although most of my constituents have been fortunate to share in the prosperity that has returned to Ontario since 1995, they are concerned about health care, as are Ontarians everywhere. No doubt you and your caucus will be turning your attention to this issue.

"This, coupled with the fact that the federal, provincial and territorial ministers of health will meet in Markham, has prompted me to ask your assistance in ensuring that the federal Minister of Health is made aware of the concerns of Ontarians. As you will know, the recent federal budget was a great disappointment to Ontario in that it again failed to restore the health care funding ... You yourself have said, 'I was personally disappointed with the budget because it did not assign the priority to health care that ordinary Ontarians have been telling me that they assign to it.'" That appeared in the March 6th issue of the *Toronto Star*.

"I am asking you to speak out in a similar but more direct fashion by endorsing the attached letter to Minister Rock," which I believe outlines "the urgency of the funding issue...."

"On behalf of my constituents, thank you for your attention to this matter."

I signed it.

**Mr James J. Bradley (St Catharines):** I am probably as pleased as anybody that this debate in health care is here, because now we'll have our chance to counteract some of the propaganda the taxpayers of this province are paying for in the form of advertising.



People out there who happen to be watching this afternoon or this evening should know that this government has already squandered \$100 million on self-serving, obviously blatant partisan advertising, as the member for Scarborough Southwest well recognizes as he mouths the same words as I say them. He recognizes it. The people in the back rooms, the whiz kids, they think this is really smart. But when I go to the places where there is a predominance of Conservatives, some of the groups that I speak to where I know there is more than a small sprinkling of members of the Conservative Party or the Reform-a-Tories, as you are over there now, I ask them: "While it may be smart politically for the party which you support, is it really good for the democratic process? Is it not an abuse of public office?" The answer to me is obviously yes. Is it not an abuse of the taxpayers of this province to take at least \$3 million, probably much more, to spend on advertising attacking another level of government?

If the Progressive Conservative Party, which has ample funds from all those fundraisers you hold where the developers fill the pockets of the party with funding—if you have ample money to advertise, I guess I can't quarrel with that. I may quarrel with the content; I cannot quarrel with that tactic. But when you take taxpayers' dollars—you, the so-called penny-pinchers, the so-called defenders of the taxpayers of this province, taking money out of the pockets of Ontarians, hard-earned money from people who are poor, even, in this province—to use for government propaganda, that is simply unacceptable. You will never hear any government backbencher ever concede that, except of course when they're on their way out.

I found the ministers' meeting interesting, when I saw the health ministers meet together in the north of Toronto, in Markham. Sometimes I would like to be a reporter, because I would like to have the questions that one could ask. I would have asked the question of all those provincial ministers: "How many of your governments are cutting taxes? How many of you who want more money for health care are in fact taking the money you're getting now and giving it away in tax cuts?" That's exactly what the Harris government has done. The Premier used to say: "There's plenty of money in the health care system; it's simply how it is distributed that is important. We need reform."

First of all, I should go back to the advertising. I found the advertising—in this case, paid for by the Conservative Party—the one about tax cuts, rather interesting. Before the federal budget, all we heard about was advertising saying, "Please give tax cuts." There was not a word in those ads—paid for, in that case, by the Conservative Party—about health care, just tax cuts, the old mantra: Keep taking money out of the system, keep defunding every public sector institution that we have in Ontario, keep dismantling the levels of government which would intervene on behalf of poor people, not the rich and powerful, who this government represents, but average, middle-class and economically deprived people

in this province. You're taking that money now and you're firing it away on advertising.

I watched over the last five years as this government took the funding it got from the federal government for health care and gave it away in tax cuts. The government didn't even spend the most recent amount of money that was given last year. Instead, it squandered it away, again, to finance its tax cuts, which benefit the wealthiest people in this province the most. So when people look at this Legislature and this government, they should know that if you have no social conscience at all and you've got lots of money and you're a powerful person, then you should be supporting the Harris administration.

1600

Health care is at risk because members of this government, in the back rooms particularly, do not believe in the kind of health care system we have today. The real agenda is to find an excuse to have a two-tiered health care system, one where if you're rich enough you buy yourself to the front of the line, and if you're a poor person, well, it's just too bad; one where you start delisting drugs which are essential to combat disease and afflictions; one where you make people who are sick pay—in other words, the only thing they've done wrong, and of course that isn't wrong, is that they've become ill.

Compare the United States system, which these people idolize, to our system. One thing I think all Canadians of goodwill can be proud of, and I could say three political parties in this province in years gone by, is the kind of health care system we have built in the province of Ontario, universally accessible to people in this province regardless of where they might be in the economic strata of this province. That is now being removed. Now, item by item is being privatized in this province. We know there are people in the back rooms of the Conservative Party who seek to privatize as many of these services as possible so that the rich will get the best service and the rest will just wait until it's their turn.

I think we should build on the strengths of the system we have now. I advocated for the members of the government. The member for Mississauga West, Mississauga Centre now, who has a sense of humour, would recognize that I was being less than humorous on the occasion—a little bit of humour involved maybe. What I essentially said was that I had a plan for you, a plan that would allow you to bash the federal government and still fund health care adequately. That plan was to abandon yet another tax cut that you people have promised to implement, and what you could do is what most people in this province want you to do, that is, invest that money in health care. Then you could say, "Look, we're not going to proceed with the tax cut because we need the money for health care and we consider that more important." You can blame the feds. You can say, "It's the federal government's fault that you're not getting the tax cut." You can go ahead and say that. I'll let you say it. I'll support you. I'll say, "Sure, that's their good excuse."

But time and time again, when it comes to a decision between the public good in terms of those

services which government had provided, which are needed for the people of Ontario, and tax cuts, you have opted for the extreme right-wing agenda of simply giving money away in tax cuts, and those tax cuts, of course, benefit the richest people in this province the very most in terms of the actual dollars they receive.

If you're a senior level of government, in this case—first of all, I get a laugh out of this. The member from Niagara Centre and I find this amusing, that you people talk about downloading or a senior level of government not accepting responsibility. In the Niagara region, you have had a transfer of services with them where \$18 million of new money is now the responsibility of the local level of government. You've simply dumped it on the local government and then you blame them when the service isn't provided. Then you have the audacity to criticize another senior level of government when you do exactly the same thing. Of course, once again, it's because your choice is tax cuts and your choice is giving money away, very often to the very people in this province who don't need it, that is, the wealthiest people in this province, who can well afford the tax regime which is in place.

For a federal government, of any stripe, dealing with the Ontario government, what you would advise them, if you wanted to be wise, would be to spend directly on health care, because if you transfer it to Mike Harris he just gets it and gives it away in a tax cut again.

**Mr Jean-Marc Lalonde (Glengarry-Prescott-Russell):** And on advertising.

**Mr Bradley:** And on advertising, \$100 million worth of government advertisement.

So if the federal government is going to spend money, the solution would be that they should spend it directly. Go into the hospitals and say, "OK, we have an infrastructure program and we're going to pay this portion of it now," or "We're going to pay half the cost of an MRI" or any other piece of equipment in the hospital, because the provincial government pays zero right now for that; they give the approval, but they pay zero in terms of the capital cost.

I have a good solution for them, that is, put the money directly in. Every time they have given you people money for services like post-secondary education or health care, you take the money and give it away in the tax cut, and then you whine.

My friends in the New Democratic Party will well remember some of the present members of this government who stood in the House and criticized Bob Rae. They said he was whining, he was complaining. Doesn't he understand that the provincial government can cope with the fiscal realities of the province? They tried to put him down for that, when in fact he was in difficult economic circumstances at the time. Unlike you, he was facing a huge provincial deficit. He was facing difficult circumstances—

*Interjection.*

**Mr Bradley:** Well, let's look at it. You can't blame the NDP—I know you people like to blame the NDP for deficit financing. They were in a situation where the

American economy was in a downturn. You are in a situation where the American economy is in an upswing. What has caused the prosperity in this province has nothing to do with your silly tax cuts; it has everything to do, first of all, with low interest rates, which are the responsibility of the federal government, and has everything to do with the low Canadian dollar, which makes us extremely competitive, particularly in the automotive industry, and it has everything to do with the booming American economy. Because we export so much to the US, which is nice when the economy is booming—

*Interjection.*

**The Acting Speaker (Mr Michael A. Brown):** The member for Brampton Centre, you're not in your seat.

**Mr Bradley:** Our economy is booming. So this mythology from the whiz kids that they give you in the government backbenches is all baloney. It's phony baloney. That's exactly what it is. Yet you people get up and read that stuff. I don't know how you can read it. Just tear it up and admit the fact that it is low interest rates, which business loves; it's that low Canadian dollar, which really helps the exporting industry; and it's the booming economy in the United States. That's what the prosperity is coming from in this province. It has nothing to do with your silly tax cuts.

I well remember, and my other colleagues in the House who were here then will remember, when the federal government announced a number of years ago a fiscal plan for restricting its expenditures. Mike Harris said, "Don't worry, we can handle that." In fact, he often said to the federal government of the day, "You didn't cut enough." Today he's lining up to whine, because his real agenda is to try to elect the Reform-a-Tories. This is not the federal Progressive Conservative Party, who are relatively moderate people. We're talking about the Reform Party with its new name, whatever it is. I don't know what it is. I understand you're not supposed to say it in this House or any place where people can hear it—it's called C-R-A-P or something like that.

*Interjections.*

**Mr Bradley:** I'm trying to hear the member for Etobicoke to help me out with how you pronounce the name, but those are the initials. The real purpose of this government now is to take taxpayers' dollars to try to defeat another level of government. Well, they should manage their own affairs.

One thing you can say about the Harris administration and the whole bunch of them is that they're first in line to accept the credit and last in line to accept the responsibility. The member for Eglinton-Lawrence has a new name for them.

**Mr Mike Colle (Eglinton-Lawrence):** Pass the buck. 1610

**Mr Bradley:** The pass-the-puck government. Whenever there's something, they blame local government or the federal government or the NDP or the Liberals or something, but they never take responsibility themselves for things that go wrong in this province.

What I have watched this government do is simply close the doors of hospitals and have emergency wards



backing way up. We have long lineups of people waiting for bypass operations, for instance, necessary cardiac surgery. We have many people—a large number of them elderly—who are waiting for hip replacements or knee replacements. We have people who need cataract surgery. And here you are, putting the cap on ophthalmologists in the Niagara region when we don't have enough ophthalmologists. Therefore people have to wait for many months before they're able to get the kind of eye care they need.

What you people do in the extreme right wing, aided and abetted by the Fraser Institute, the National Post and your friend Conrad Black—

*Interjection.*

**Mr Bradley:** I know you wanted me to mention Conrad Black. What you people are trying to do is cause a crisis in any public institution. You try to create a lack of confidence in public institutions so that people will accept a radical solution which they wouldn't normally accept. What you're trying to steer towards now is privatized health care. People will have such lack of confidence in the health care system that you're going to say: "We've got the solution. We're going to do what Ralph Klein does. We're going to start setting up private clinics, private facilities." That's what your agenda is on the other side.

You did the same thing in education. You created a crisis so that people would lose confidence in public education and accept radical solutions. They say, "Well, maybe we have to close our hospitals," as if that wasn't crazy. I call it crackpot realism when people fall for the kind of trap you people on the other side set.

I want to mention as well something you forget. I'm not here to look at what the federal government argument might be, but I remember Frank Miller asking for what was called "tax points." The government members laugh at this, because they know it's too hard to explain. "We have the simple message, and the simple message is the easy message. We'll just put that out in our ads and that's it." But what the provincial government asked for was room in taxation. The federal government said, "OK, we'll give you this room in taxation so you can have it and spend it as you see fit." I think the federal government shouldn't have done that. I think it was a mistake on their part to fall for a Conservative government asking for this kind of tax room.

The reason I say that is because there's no guarantee about how you're going to spend it. You bought an oil company—you were part of an oil company. You squandered it on Minaki Lodge. You were going to buy, for the comfort and convenience of the Premier and members of the cabinet of this province, a jet which was made in Houston, Texas, a Challenger jet worth \$15 million. You had money for that in those days.

What I'm saying to you is that—

**Mr John Hastings (Etobicoke North):** Don't try to reinvent history.

**Mr Bradley:** Before I go to that, I hope you people will vote for the amendments to your motion put forward

by the Liberal Party and the New Democratic Party. If you voted for the Liberal amendment, we'd probably vote for the motion. If you allowed it to be amended, we would vote for the motion. Everybody could agree. But I don't think you'll do so. Guy Giorno has said you're not going to do it, and that is exactly what's going to happen.

Some of us know also that the CCACs, the central agencies which look after home care, out-of-hospital care, are vastly underfunded at this time and not able to cope with the responsibilities that have been thrust upon them as you fire people out of hospitals much more quickly.

Far more people today have to hire private nurses in the hospitals in order to get the appropriate level of health care. Is it because the people working there are not doing their job? Of course not. It's because there are not enough of them. You fired 15,000 nurses out the door when you were downsizing. Now you have to pay for the severance packages for them and you say, "Look at all the money we're putting back in for severance packages." In essence, you always have money for tax cuts which benefit the richest people in the province the most, and you always have money for self-serving, blatantly partisan propaganda paid for by the taxpayers of this province.

What you should be doing is strengthening the health care system, taking the money you are going to put into a tax cut in the upcoming budget and applying it to health care. That isn't the only solution. I listened with a good deal of interest to the member for Beaches-Woodbine, as I still call it, and a former NDP Minister of Health, who I thought, by the way, was one of the least partisan people in the House on this issue. I think the reason is that she's had the responsibility of being the Minister of Health and recognizes there are changes that may come about and are required, and it really requires the building of a consensus and not simply a mudslinging contest that we see going on now, a phony mudslinging contest. What you've got going now by spending your money is you've got the federal government spending taxpayers' money to retort. A plague on both your houses for the money that you're spending on advertising.

I have to remind my friend Mr O'Toole, who started this, who threw the first snowball in this particular fight. It's time to put that aside. It's time to rally to medicare, as it was established by the federal Liberal government on a national basis and by the New Democratic Party in Saskatchewan under Mr Tommy Douglas. That is the kind of health care of which we can be justifiably proud, and I will be in this House and on the campaign trail any time to defend public health care as it is in the province of Ontario.

**Mr Peter Kormos (Niagara Centre):** This is an important debate. It's important not only because of the substance but because of why we've been drawn into it at this particular point in time.

Let's speak very directly to the whole matter of the Paul Martin budget and the two cents for health care for every dollar in tax cuts.

**The Acting Speaker:** To the member for Niagara Centre, I've made an error, and in the rotation apparently it is not your turn. So we'll turn to the government party. The member for—

*Interjections.*

**The Acting Speaker:** Let's hold up here just for a second while we get this straight.

My understanding is that the New Democrats skip every second rotation on a substantive motion. The member for Brampton-Gore-Springdale-Malton.

**Mr Raminder Gill (Bramalea-Gore-Malton-Springdale):** It's pretty close, thank you. In fact, it's Bramalea-Gore-Malton-Springdale.

Earlier this week, Premier Harris tabled a resolution in this assembly to have Ottawa restore \$4.2 billion in transfer payments to Ontario. This resolution is about taking leadership in representing what is in the best interests of Ontarians. Premier Harris's resolution is also seeking to clarify federal and provincial responsibilities in health care.

Ontario wants clarity from our federal government about health care spending. Ontario's request for clarity should not surprise Mr Chrétien and his Liberal cousins across the aisle. As a matter of fact, one would suspect that they would want to follow in the spirit of the glasnost which recently swept through Ottawa. Our Liberal friends were insisting on clarity: clarity of question, clarity of who will be the next Liberal leader and clarity of what the future holds for Mr Martin and his gang of rebels.

We know that Liberals everywhere have only recently discovered clarity, except perhaps at HRDC and Shawinigan—or shenanigans, for that matter. Those are Liberals, after all, and Ontarians have come to expect double-talk and hypocrisy from them. First, our Prime Minister was clear about what he will do about the GST. He was clear about what he will do about the free trade agreement. The list of Liberal hypocrisies and double-talk goes on and on.

Ontarians like clear and honest leadership. That is why they endorsed Premier Harris's Common Sense Revolution in 1995 and reaffirmed that support in last year's election.

1620

The resolution introduced by Premier Harris urges the federal government to come clean and fess up about health care spending in Canada.

For the audience at home, let me reiterate. Section (a) of the resolution reads: Be it resolved that the Legislative Assembly of the province of Ontario "condemns the government of Canada for cutting, by \$4.2 billion annually, base payments under the federal government program that supports health care, the CHST, while provincial governments have increased health care spending."

The resolution goes on to urge the federal government of Canada to permanently restore the health care funding that it has cut and to assume its fair share of increased, ongoing funding to meet the health needs of our country's aging and growing population.

For Ontarians everywhere, even Liberals, this resolution is clear. The federal government has massively reduced health care spending by cutting transfer payments to Ontario by \$4.2 billion annually. This might shock our friends across the aisle, but cutting money from the Canadian health and social transfer program means cutting health care. I'm sure some of my Liberal friends across the aisle might doubt that their cousins in Ottawa would cut health care spending. I'm sure they're saying, "Liberals would never do a thing like that, not us," not even when they're caught with their hands in the cookie jar.

Let me quote the 1997 red book for all the members of the House. It says on page 71, "It is a fact that during our first mandate, this government reduced transfer payments to the provinces." Jean Chrétien said, in an interview with the Toronto Star on October 27, 1996, "We needed to squeeze [medicare] in order to save it." Let me repeat our Prime Minister's words, "We needed to squeeze [medicare] in order to save it." Jean Chrétien needed to squeeze medicare in order to save it. I'm sure he says that about protestors too—but I digress.

I am sure the members of the opposition would condemn the Prime Minister for squeezing medicare.

**Mr Bradley:** What did Bart Maves tell you to say there? What note did he give you?

**Mr Gill:** Mr Maves told me not to listen to the rhetoric of the opposition and continue with the message.

I am sure Mr McGuinty will do something that he has failed to do so far: show some leadership when it comes to defending health care in Ontario.

*Interjections.*

**Mr Gill:** All four of the members opposite are listening, I'm sure.

Speaking about leadership, I am sure the members of this House are wondering: "Where is our Liberal Minister of Health, the Honourable Allan Rock? What does he have to say about the CHST and medicare?" Allow me to share with you the comments made by the honourable minister at the Canadian Medical Association meeting on August 20, 1997, in British Columbia. Mr Rock said to Canada's health professionals, and these are his words: "I am part of the problem, not the solution. It was my government that diminished the size of transfer payments." The honourable minister went on to add: "I will not stand here and tell you that the cuts in transfer payments we made were very insignificant,"—he said they were not insignificant—"and I won't tell you that they have had no impact. They have."

There we have it: Liberals telling the truth. I know that this is not a common occurrence, but let us accept the Prime Minister and the health minister at their word. They've acknowledged that their government, the federal government of Canada, cut transfers to the provinces and it had a major impact on provincial health care. It is the federal government cutting the \$4.2 billion in Canadian health and social transfers, while it is our government which has increased spending to make up for the federal cuts. Today, Ontario is spending \$3 billion more than we



did in 1994-95 on health care. The federal government is spending \$1.7 billion less in 2000-01 than it spent in 1994-95. That is a huge margin of difference. The facts are clear: Mike Harris is working to save health care, and Jean Chrétien is squeezing it by cutting \$4.2 billion in order to, as he puts it, save it.

Ontarians are tired of the rhetoric from Mr Chrétien and Mr Rock. They do not believe the ads the federal Grits are running in the morning papers. These ads claim that Ottawa increased spending in transfer payments by 55% over the previous year. But when you're spending a small amount and you increase it by a few dollars, you could make the claim that you have increased transfer payments dramatically. That is the Liberal math. The facts speak for themselves. I'm sure my friends across the aisle realize the truth by now: The Chrétien government is spending \$1.7 billion less in 2000-01 than it did in 1994-95, and the Mike Harris government is spending \$3 billion more over the same period.

Only one party has cut health care spending in Canada and that is the federal Liberals. In urging the members of the House to support the resolution introduced by our Premier, I would like to remind everyone that now that the deficit has been eliminated the provinces have a duty to get back the dollars the federal government cut from health care; if we don't, we all know that those crafty Liberals in Ottawa will only find new ways of spending our money.

**Hon Rob Sampson (Minister of Correctional Services):** Jane Stewart will find a way.

**Mr Gill:** A boondoggle of \$3 billion, that's what it is.

We all know that in Ottawa our federal government is already finding new ways to misplace billions of our taxpayer dollars. They are happily wasting taxpayer dollars on golf courses and water fountains in the Prime Minister's riding, but when it comes to restoring funding for health care, Mr Chrétien and Mr Rock are nowhere to be seen.

**Hon Mr Sampson:** Would that be the riding of shenanigans?

**Mr Gill:** Shenanigans, that's it—Shawinigan, I guess.

In asking all members to support the resolution before the House, I would like to remind you that when we entered into the medicare program with the federal government years ago we had an arrangement whereby they were going to pay 50% of the costs. That was a 50-50 agreement. Today, after years of cutbacks to the provinces, Ottawa is only paying 11 cents on every health care dollar. The provincial government is spending 89 cents, while Ottawa is only spending 11 cents. What happened to the partnership? Whatever happened to the 50-50 agreement? If they had any sense of honour or integrity, Mr Chrétien and Mr Rock would be restoring the \$4.2 billion they have cut from Ontario immediately. Instead they are out on their high horse galloping around the country engaging in rhetoric and doublespeak on health care.

1630

Ottawa has a responsibility to ensure that all citizens in Canada have the best health care possible. Members of

this House also have their responsibility. This is why Premier Harris tabled this resolution. It is now up to the leader of the official opposition to recognize our joint responsibility and join with all the members of this House in supporting a strong health care system for Ontarians. To do otherwise, Mr Speaker, would be a dereliction of duty. I urge all the members to support the unanimous adoption of this resolution.

**Mr Bart Maves (Niagara Falls):** Unfortunately, I only have about five minutes, so I won't start off by telling everyone I'm going to be non-partisan in this debate. I'm sorry; I feel the need to be just a little bit partisan. Had I had a full 20 minutes, perhaps I'd do a whole spiel on the health care system and where we need to go, but after hearing some of the rhetoric I've heard the past few days about this debate, I feel I need to engage in a bit of discussion which, unfortunately, will be a little partisan.

One of the reasons I think it's absolutely essential for the federal Liberals to come back to the table and increase money in health care spending is because they have to find a cure to the disease that they're all afflicted with, federally and provincially. That would be foot-in-mouth disease, Speaker. If you look back at the record of some of the changes of policies, some of the flip-flops that the Liberal Party has made both provincially and federally, they are certainly afflicted with this disease and they certainly need some help.

In a recent press release that the provincial Liberals put out, and Mr McGuinty's office I believe would have put this out, he talks about how recently they wanted to call a motion calling on Queen's Park and Ottawa to spend more money on health care. The Liberals provincially condemned both the federal Liberals and the provincial Tories for not spending enough on health care.

Well, it's interesting if you read the record, Speaker, some of the comments made by provincial Liberals. Here's a quote from Ian Urquhart's column back on March 6, 2000, from Dalton McGuinty. "Just throwing more public money at medicare will not save it as a single-tier system," according to McGuinty. So McGuinty, on one hand, wants to bring forth a motion saying, "You guys need to spend more money on health care federally and provincially," then on March 6, 2000, says that's not going to save it.

He's done that before. Way back on September 22, 1996, he said, "I'm convinced that there is enough money in the system." That's back in 1996, Speaker. As everyone in this House knows, we've replaced a lot of the money the federal government has taken out, plus added our own money on top of that.

Here's another quote from Mr McGuinty. A caller on a CFRB radio show earlier this year says, "I'd like to know what Mr McGuinty specifically proposes, because I don't think putting more money is the solution." McGuinty's response? "I agree." So, Speaker, you can clearly see McGuinty takes one position publicly in the House earlier this week, his very recent comments, and even his comments back in 1996 are completely counter to that position.

But he's not alone. Here are some comments from some other folks in his party that show how deeply this foot-in-mouth disease and the flip-flop problem of the Liberals run through that party.

Here's Gerard Kennedy. Remember, he was the Liberal health critic for so many years. While running for leadership a few years ago he talks about de-listing. Now, in the House, any time the OMA and the Ontario Ministry of Health come up with de-listing some non-essential services, it's a hue and cry from Mr Kennedy, but here's what he said about de-listing: "We have to look at a combination of patient responsibility and doctor responsibility. We want to make sure that we take some of the non-essential stuff out of the health care system." So one thing then, Speaker; a totally other thing when he's here in the House.

Again, Dwight Duncan, another member opposite who ran for the leadership, talks about health care. Now he's ranting and raving every day in this Legislature at us to spend more; a little softer on his federal Liberal cousins. He says: "Specifically, in my view, we are spending enough in health care. I was part of a process that reduced in my community from four hospitals down to two hospitals and reinvested in a number of integrated delivery systems." That's Dwight Duncan, a member from the Liberal Party across the way.

It's interesting. I think it was called a win-win committee. I remember one day when Ms Papatello from Windsor was in here ranting and raving about hospital closures in her riding. Then we found out that, lo and behold, she was part of this win-win committee in Windsor that had actually advised the closure of those hospitals. So one of the key reasons they need to put some money back is they have to find a cure for their own foot-in-mouth disease.

I find it very frustrating, after four years of very difficult change in the health care system in Ontario, where we have moved to more home care, an 87% increase in home care in the Niagara region alone and a lot more around the province, where we're committed to 20,000 new long-term-care beds—we are moving the health care system and reforming it in a direction that all the experts say we should go in. Allan Rock comes along and stands there and says: "Well, maybe we'll put in more money, but we need to reform the system. We need to change the system. We need to move to more home care, more long-term care."

I see that, and as a member from Ontario who has worked very hard to reform the system over the last four years I get very frustrated and I want to know, where is this fellow's riding? I thought he was a member from Ontario. Has he been completely oblivious to the change that has been happening in our health care system, to the difficult process that we and other provinces before us have gone through? I believe he has. He needs to quit playing political games and he needs to truly sit down at the table and talk turkey with the rest of the provinces.

**Mr George Smitherman (Toronto Centre-Rosedale):** I join this debate—well, actually, "debate" might

be a little rich for what's going on here. I join this mud-slinging session with an extraordinary sense of despair and of shame. I have to say that the way this debate is taking shape simply seeks to assess blame for failure. That's the easy side to be on. I want to be on the side alongside those whose legacy will be that they made our system of health care better. Nothing—I repeat, nothing—means more to me. Nothing defines my country more than the principles behind our universally accessible system of health care. And nothing could be more important to the constituents in my riding, Toronto Centre-Rosedale, many of whom are poor, many of whom suffer through challenges that require them to have access to a very good, universally funded system of health care.

My riding is also home to a co-op named after Tommy Douglas, who has been referenced in this House many times and to whom we owe a great debt of gratitude. I would say that the leaders of our country, the politicians, my colleagues in government, are spending every waking hour focused not on how we can improve our system. These same leaders spend every waking hour on the task of fixing responsibility for who has screwed it up. What will be left when all is said? Have no doubt, more will be said than done. But when will we get on with the task of improving the system? What will be left of the system? Which Canadians will still have confidence in it? Which health care professionals will still want to work in it? What foreign country will be attracted to locate here because of it?

I think as politicians we all fancy ourselves pretty savvy marketers. But if we had a product with pretty good fundamentals, would we focus on the need to improve it, or would we simply drive it into the ground? I think that's what we're doing. I'm embarrassed, as a new generation of politician, by our collective failure to seize our opportunities and our responsibilities. Not that long ago in this country, a different generation, acting in good faith, created a system that people all around the world have marvelled at. Now, 30 or 40 years later, we're playing hot potato with an essential, defining part of my country. I don't like it. I don't like that one little bit. Canada's system of universally accessible health care is not a suitable subject for a high-stakes game of chicken. I don't want to be partisan about this, because there is only one taxpayer and on this issue what I'm afraid of more than anything else is that there's only one politician. Do my constituents watching on TV today see me as an opposition member? No, they see me as part of their government. To that end, I think we all owe it our constituents and to ourselves to take a hard look at what we're contributing to.

**1640**

This debate has become so heated and so polarized that it's probably heresy for me to say that Allan Rock is a friend of mine, that I have confidence in him and that I believe he has the best interests of Canadians in mind. And I certainly know that it's heresy for me to say that I believe our own Minister of Health thinks she's acting in



the best interests of Ontarians. But can you imagine in the current environment that any progress is going to be made, any progress whatsoever? What with all of the briefing spent every day for communication strategy and spin sessions, do you really think the ministers in the provincial ministries of health or our leaders or the Minister of Health in Ottawa are spending their time working with their deputies to improve the system? I don't. I think they're spending way too much time working on who can get the advantage, who can have the best spin, who can hammer the other side. I think that's disgraceful, and we all collectively, as politicians, owe more to our constituents.

Who's responsible for creating this environment? I mean, who really cares? We've all contributed to it. I want to know what it's going to take for someone out there to decide that there's more at stake than this, that there's more than this pissing match, that it really matters that we get together and work—

**Hon Dan Newman (Minister of the Environment):** Oh, come on.

**Mr Smitherman:** They're awake. I withdraw any reference to that. The Tories have finally woken up to what they're involved in and find it distasteful, but every single day that's what their contribution to this is.

As Liberals, we wanted to introduce a motion that basically said both governments should be and are responsible for some of the problems and challenges in the system. I believe that if members were to talk to their constituents and not be partisan about this, most of their constituents would say that they're tired of governments, provincial and federal, hammering each other with salvo after salvo after salvo and not getting on with the real task of finding improvements in the system. There is plenty of blame to go around, isn't there? Does it just come down to which level of government is going to ask the taxpayer for how much money? Is that where we're at in Canada in the new millennium?

I was thinking the other day about the success of John McCain's campaign in the United States. His Straight Talk Express was seen as so remarkable because for a brief shining moment he let it all hang out. He dropped the spin and his guard, he cut the crap, he told the truth, he called them as he saw them, and that was considered to be such a big deal.

**Mr Maves:** That was straight talk.

**Mr Smitherman:** You know what? You can't travel for hours and hours and hours and be full-time spin. Perhaps the member can.

Now don't get me wrong. I'm not pretending to be anything like John McCain. I've never had a chance to do anything the least bit heroic. But, at a bare minimum, what I decided to do last night was try to contribute to this debate by being straightforward and clear and by making some confessions.

The first confession I want to make is that I believe our health care system provides an extraordinary amount of terrific care every single day; that we need to build on the core values that we have as Canadians; that I embrace

the opportunity to participate in a meaningful debate about reforming our health care system; that we recognize that with something this big, affected as it is by so many changes and growth and science and technology, reform is appropriate; and that in the riding of Toronto Centre-Rosedale I'm ready to work with the government to reform health care in a way that will help my constituents.

We have a lot of work to do. We still haven't delivered in Toronto Centre-Rosedale, as an example, on the Health Services Restructuring Commission's call for an ambulatory care centre that was to come in place of the Wellesley Hospital, which will be closing shortly. The diverse needs of my inner-city riding and the neighbourhoods there need to be served by a street-level, easy-to-approach institution that can try to provide care in a cheaper forum than emergency rooms.

Earlier this week there was a story in the paper about frequent flyers, those people who are not rooted in the health care system, who do not feel that they have primary care as provided through a physician. The burden that those individuals are placing on our health care system because they seek care in emergency wards is just one example. My riding of Toronto Centre-Rosedale can be a place where ambulatory care centres can be instituted, where care can be delivered on a more grassroots basis and in a much cheaper way than emergency wards, where people are receiving that care now.

We can stem the trend towards the flu-invoked winter-time chaos in our ERs by reaching out again at the grassroots level. We can begin to implement a plan now, rather than simply waiting for the flu season to strike again and for our ER wards to be full and for a full crisis to emerge.

I don't know if that was straight talk, but I believe that in attempting today to participate in this debate and make a contribution which seeks to focus on the need to reform the system, which highlights the extent to which I'm willing to play a role in that, that's a benefit, and that my constituents are better served by that than another 20-minute speech in this place seeking only to heap blame and responsibility on people of a different partisan stripe than me.

We have, as I said at the outset, an incredible system here. So much time has been spent in the last little while—the newly minted Minister of the Environment from Scarborough scoffed at the word when I said that most politicians think they're pretty savvy marketers. But I do believe that each of us, in our own way, is a marketing product. We work in our constituencies, we work hard to get elected, and we work hard in the years after that to try and make sure that our constituents know that we're working hard for them, that they know what we're doing and what we stand for.

But when we look at the health care system and how centrally important it is to Canadians, as politicians, of late and for longer, instead of focusing on the extent to which the system can provide and does provide on a

daily basis good health care, we focus only on this battle, this mudslinging effort. I believe that at the end of the day, the real danger to all of us who celebrate the system and want to see it improved is that we will demean it to such an extent that we will devalue it, that we will run the product down, that there will be a feeling of crisis emerge that is far greater than the extent of the problem itself. I believe that if we're participating in that knowingly, as members of this Legislature and as politicians across the breadth of this country, then we're failing our constituents and we're failing the taxpayers and we're failing one of the greatest legacies of this great country of ours. I urge members, as they participate in this debate and this discussion with their local media and with their constituents, to be more mindful of that, because I do believe that this has gotten way, way out of hand.

I mentioned earlier that I want to be a participant in this debate, with respect to my riding of Toronto Centre-Rosedale, to try and make sure that the system as reformed serves my constituents even better. I have a riding that has an extraordinarily large number of hospitals in it—many fewer than it had not that many years ago. In the move towards merged operations, there are challenges, and some of those challenges are not being met. I'll say again that we've got a challenge in Toronto Centre-Rosedale to open an ambulatory care centre, which was to be a more modest venue to provide services to some of the harder-to-service communities in my diverse inner-city riding, and yet we haven't seen any action on that. The Health Services Restructuring Commission recommendation goes without any body, without the Ministry of Health in Ontario, ensuring that the community which was promised such a facility actually gets it.

I'll be working in the next little while to try and make sure that the Minister of Health, taking some time away, I hope, from the kind of communications efforts that she's been involved in, can try and help make sure that my community gets the ambulatory care centre that it was promised, that it deserves and that it most certainly needs.

There are so many other priorities and challenges. The member from Niagara mentioned a few minutes ago that there have been increases in the extent to which the government funds home care. The numbers may speak to that, but any of us as members know of the extraordinary challenges in the community care access centres. My riding of Toronto Centre-Rosedale is home to communities like Regent Park and St James Town. These communities are typically defined as hard to service. One of the problems that we're having is not just with the amount of money available to the community care access centres, but we're having a real problem finding adequate and properly trained individuals who would deliver that care. I am working to try and assist in finding a new crop of people who would be able to go and provide those services in those communities that are hard to service—again an example of what I want to do as a member.

1650

What I want to be known for is not my ability to toss as much mud as possible but to participate on the most

important issue facing us in this place. The most important thing that I will ever do in my time here as a member is contributing to an improvement in the health care of the constituents of my riding of Toronto Centre-Rosedale.

In recent days, we've seen an effort on the part of the government around mental health care reform. These are some long-overdue efforts. My colleague the member for Ottawa Centre has been leading this and introduced, I believe, three private member's bills on this issue. This is a tough issue. It's a controversial issue. In my constituency people will come down on both sides of it.

I had a conversation recently with a woman who is the executive director of the Regent Park Community Health Centre, a fine, new facility and, I would say, the major achievement of my predecessor, Al Leach. This centre is struggling every single day in a much more modern facility with the burden of delivering service, again in a hard-to-service community, targeted at too many people who are without other primary care and who expect and need mental health services that frankly are not accommodated in the modest budget of that place.

We need to find additional resources to treat people who are making their home in the inner city, who are my constituents and who require assistance. This is the kind of thing we need to focus our energy on, not just on being briefed for the communications challenge of winning the battle of assessing blame for the challenges there are in our health care system at the moment.

We know as well that there are challenges in a number of other areas. I've had too many constituents write to me and talk to me with respect to their problems in accessing cancer care. I believe that all of us as Ontarians have sympathy for situations where people don't access care early enough and where too often the care they require is not available in any proximity to the place they call home.

To be blunt about it, this is something that has bedevilled our health care system. Do we have any energy as politicians and as leaders to focus on that problem, perhaps to make it right once and for all for the next people who will receive that frightening diagnosis, or will we spend all our time and energy on this resolution, day after day, tossing as much mud as we can at people who have a different partisan stripe than ours? I hope not. That's an easier speech to give. That's easier work to do. But I hope members will want to be on the side of trying to leave a legacy of a better publicly funded and accessible health care system.

I know we've had to talk, as an example, about some of the challenges for new and expectant moms. I know my colleague, our health critic, Lyn McLeod, cited the example of a mother who was flown from Brampton to Ottawa to deliver her twins. Less than a year ago, my executive assistant's sister-in-law was to fly to the US from downtown Toronto when she went into premature labour, only to be airlifted to Kingston at the last minute. She was stabilized and sent home. A week later she was almost flown to Ottawa, this time because no high-risk



prenatal care was available in Toronto or anywhere in southern Ontario for that matter. She settled instead for medium-risk care in Toronto. I think we would all acknowledge that at the end of the day she got care, but did she get it in the most optimum way? Did she get it in a way that was most efficient and that delivered the best possible result for her, for our taxpayers and for our province?

We need to see from this government as well a recognition that while the greater Toronto area is growing at extraordinary leaps and bounds, as are other parts of our province, the city of Toronto is not in decline from the standpoint of population. I mentioned in an earlier debate today that my riding of Toronto Centre-Rosedale is going through an extraordinary explosive growth with respect to new condominiums and infill housing that will add density and improve communities throughout my riding: in the Yorkville area, 15 new condominiums; in the King-Parliament area, almost an equal number. These are not just empty dwellings. These are homes to people who require care. At the same time, we see a diminishing quantity of care available in the downtown core at least as measured by the hospital access we have.

We see that the government has made significant commitments with respect to numbers of long-term-care beds but taken very little action on that. Many people have commented, in a partisan and in a non-partisan way, with respect to the planning that went into the government's decision to eliminate beds in hospitals before replacing them in a long-term-care setting. We still have a lot of work to do to live up to the communications effort that has been made to announce those beds, and certainly I have many constituents who are in very dramatic need of those.

My party has been working in the last little while to help, we think, to offer suggestions. The government will often stand and say that the opposition parties merely make criticisms. This week, we began to speak about the need to have access to primary care physicians, and my leader has talked about 24-7 care. We use terms in this place all of the time and in the health care system that mean very little to our constituents, that don't address them in a way that they understand.

It strikes me that we have to find a way to better gauge what our constituents' needs are. It strikes me that a patient's voice sometimes is best represented in the public opinion polls that show enormous concerns. Does the public feel well served by the debate that has been raging all around us, with their millions of dollars of taxpayers' money—and there is only one taxpayer, as you will often remind us—being spent on advertising? I doubt it.

The strategy of the provinces, and especially in Ontario, seems to be: Throw as much you-know-what as you can and see what will stick. Sometimes the opposition has a vantage point that allows a little perspective. This week my boss, Dalton McGuinty, made a good suggestion when he said, "I don't want to fight about health care; I want to fight for it." Me too.

**Mr Kormos:** The most interesting part of this debate isn't so much the motion by the Premier as the amendments being offered up by the respective opposition parties. The Premier's motion speaks for itself. I'm sure New Democrats agree with the sort of baseline sympathies expressed in the motion.

We all read the budget of Mr Martin some weeks ago now, and I'm sure there were even Liberals who were disappointed at the fact that there were but two cents new money given to health care for every dollar in tax cuts. I'm confident that many Liberal Party supporters don't agree with that proposition; I certainly don't. But I've been here long enough to get the sense that it's a proposition that the Conservative Party not only would agree with but has set the pattern for. Having said that, my colleagues in Ottawa, Alexa McDonough and New Democrats there, have been raising the health care issue, the issue of funding, on a daily basis. They don't get a whole lot of press exposure doing it. I understand that better than anybody here does. I understand what it means to be in a small caucus, to be the third party. The New Democrats have been confronting the government with that on a daily basis.

I would ask the public to consider this: Where have the Reform Party members been on the issue of the Martin budget and what I will tell you are inadequate levels of support for health care? Preston Manning, leader as he was then of the Reform Party, as it was then, has preferred to focus on any other number of things, virtually everything but the inadequacy of the level of funding for health care and the trade-off of tax breaks, inevitably for the richest people, at the expense of health care.

It's not a unique phenomenon. It's certainly not unique to Ottawa. Notwithstanding it's the Martin budget of the federal government, I'm very familiar with the exercise. We've seen it happen here through the course of five years now in a number of budgets, as we've seen health care in this province gutted by this government, health care being gutted so that this government can fund tax breaks for the very richest people in this province. So I make that observation first.

Also, there has been a little bit of talk about the years 1990-95. I'm fascinated by those years—I am—for a variety of reasons. I remember when the Conservative Party was here in third party position. I remember its leader. I remember him before his election as leader and after his election as leader. I remember it.

1700

A Conservative earlier said: "Oh, we wanted CAT scans and MRIs in 1993. By God, it was hard to get them." Not that they didn't ask. I remember them asking. I remember when the government of the day would explain that there were some problems with the level of federal funding of health care and that there were serious problems with provincial revenues because we were in a recession. Revenues had dropped through the basement floor.

As in a recession, you had high levels of unemployment; then it was the recession, in the worst of times

because it was a recession that followed promptly on the heels of Brian Mulroney's free trade agreement, which gutted industrial and other manufacturing jobs here in Ontario. We had high levels of new employment as a result of the free trade agreement. We saw those jobs hemorrhaging out of Canada into the southern United States. Of course, that process carried on with the North American free trade agreement.

I recall speaking with American legislators at the time who wanted to know how we organized opposition to free trade, because now the shoe was on the other foot, you see? There were Americans in the southern United States and other places who were seeing their jobs being transferred yet further south, into Mexico. You've read about some of those jobs recently, haven't you? Some of the Toronto papers—Linda Diebel, I think, from the Toronto Star did some major stories on the new manufacturing zones in Mexico.

I've seen the vehicles, the cars that are being manufactured there. It's interesting: The cars that are manufactured in Mexico cost no less. When you go to buy a small-sized Chevy Cavalier, the Chevy Cavalier that's manufactured in Mexico doesn't cost any less for us to buy here in Canada than the one that's manufactured in the United States or Canada, yet the Mexican worker is being paid, I recall, \$2 or \$3 an hour. The Mexican worker making that Cavalier in Mexico could never afford to own one. You see, that's what free trade did. Free trade gutted Canada, and most specifically Ontario, of value-added manufacturing jobs, let them into American jurisdictions that had anti-union legislation, again similar to what we're witnessing here, the models for Mike Harris and the Tories and the revolution.

We had Brian Mulroney and the Conservatives' free trade agreement accompanied by a very deep recession. We are reminded oh, so frequently, by the Conservatives, as they call themselves today—but I've got a feeling that not all of the Conservatives here are Conservatives. Heck, 27 of them were lined up to support a Reform Party, I mean a United Reform—the "CRAP" party. I liked that from day one; I really did. But 27 of these Conservatives were prepared to line up to support a Reform Party, United Alternative party, CCRAP party—I don't know what the heck it's called, but that western—it's the Social Credit Party. That's what it is.

#### *Interjections.*

**Mr Kormos:** It is; it's the Social Credit Party. I'm old enough to remember that. I remember Social Credit from out west—a pretty wacky party. Many things haven't changed. I'm not sure we are really dealing with Conservatives here.

In any event, I have a situation down in Niagara Centre. I hear and they hear what the government states by way of their propaganda. They see the newspaper ads. Mr Bradley has made reference to them already. The timing of those newspaper ads is spectacular because we're in a pre-election period federally. I don't mind attacking the federal Liberals on a policy basis, because I'll be engaging in a campaign and I'll be doing that, but

I'll be doing it with money raised by supporters of the candidate for the New Democratic Party whom I'm going to be working with and supporting.

#### *Interjection.*

**Mr Kormos:** We can do many things well and we can do other things better.

I don't mind that criticism, but I resent as much as every other taxpayer that they should be drawn into what is effectively a pre-election political campaign with their tax dollars when in fact this government is as guilty, if not more guilty, of everything they accuse the federal government of. If anything, this government is but a co-conspirator, nothing more and nothing less. The government is engaged in a five-year process of slashing health care, shutting down hospitals, firing nurses, reducing public health services in each and every one of our communities and reducing other health programs that were available to kids. Mental health programs down in Niagara region and in the Windsor area are virtually non-existent, struggling on the most modest of budgets, although there are increasing and incredibly high levels of demand.

I know about the folks in Niagara Centre. I know they understand about health care. They know that not only is there not appropriate health care available but in many instances there is close to no health care available. Families where I come from are discovering that if they don't partake actively on a daily basis, if they don't attend at the hospital and actually participate in administration of medications and in the care and treatment of the family members that they love—the parents, the child, the grandparents—that treatment isn't going to take place.

Ophthalmologists in Niagara region: Niagara region is an aging community, one of the oldest communities in Canada, second only, I'm told, to Victoria, BC. So those infirmities that accompany old age or aging are very frequent in Niagara, and that includes things like cataract surgery. What is happening to our senior citizens down in Niagara suffering from a cataract condition, an affliction of aging? They are being told they have to go to Hamilton for treatment, because the handful of committed, enthusiastic and professional surgeons doing this type of eye surgery in Niagara has been capped. They've been told effectively by this government that they can't take on any more patients—that's what it amounts to—even though the government promised in 1998 and exempted them from the billing cap but then immediately restored it.

The problem is that the Hamilton doctors doing the same surgery say: "We're already full to capacity. We're right at the limit. We can't take on these Niagara patients." So this government's abandonment of health care means that seniors in Niagara Centre and across regional Niagara, in every community of Niagara, are being denied medical treatment that used to be their right as Canadians under a publicly funded and publicly operated, non-profit health care system.

I'm eager to hear the Conservatives on the issue, for instance, of Ralph Klein's private, for-profit hospitals.



Clearly the pattern is being set. Clearly these Conservatives have far more in common with Ralph Klein and his enthusiasm for privatized, for-profit health care than they do with any semblance of a commitment to ongoing publicly funded, not-for-profit health care.

*Interjection.*

**Mr Kormos:** You have. You've been undermining publicly funded health care to the point where you've created these huge vacuums in service to justify and argue and explain away the coming in—talk about cross-border shopping. They're lined up over there at the Peace Bridge and at the Rainbow Bridge, a mile long and three across, the American corporate, for-profit sector, ready to provide the health care that you people have destroyed here in Ontario.

1710

**Mr Hastings:** We don't have any lineups here in Ontario.

**Mr Kormos:** Well, they're there waiting, and once that American for-profit private sector is welcomed to Ontario by Mike Harris and his Conservatives, it won't be your OHIP card that you'll need to present when you attend for medical treatment; it'll be your gold card that you will need when you attend for medical treatment. Only the richest people will be able to access health care. It's only those people who will be able to afford the treatment, who will be able to take their kids, their parents, their spouses and other family members to the doctors, never mind to any sort of treatment regimen, surgery or hospitalization that's subsequently required.

I'm old enough to remember a time when we didn't have public health care. I'm old enough to remember the fight by Tommy Douglas and CCFers in Saskatchewan to build public health care. I remember what it was like for folks to have to sit around a kitchen table and debate whether you take a kid with a fever that's been there for three days to the doctor or keep that \$10 in the drawer in the kitchen to pay your rent. I'm old enough to remember that, and a whole lot of Ontarians remember that too, because it wasn't that long ago. It's been in relatively short order that you Conservatives here in Ontario have been taking us back to that time. And, let me tell you, those weren't the good old days. Kids died, and people were crippled—

**Mr Hastings:** People don't die today.

**Mr Kormos:** My friend, a Conservative backbencher, talks about people not dying in Ontario today. Can I show you newspaper clippings to remind you of some in the recent past here in Ontario as ambulances are sent from one emergency room to another, to another? There weren't deaths? You're damned right there have been deaths. There certainly have been, because emergency room doors have been barred, bolted, locked, shut to the public, because those same hospitals have been defunded by this government, because this government is far more committed to tax breaks for its rich friends than to public, not-for-profit health care.

I agree with the Official Opposition observation that this government should be compelled to ensure that

monies it receives from the federal government dedicated to health care remain spent in the area of health care. Just as this government demonstrated, or rather was exposed, earlier today—this government is prepared to reach into the pockets of women and kids under the family support plan and the Family Responsibility Office and gouge them, impose new taxes on them to the tune of \$1 million a year, not to be applied to the Family Responsibility Office but to go into general revenues.

Families in Niagara understand what's happening to health care. They understand what your glitzy television ad campaign is all about. They're not at all happy with the Liberals for having cut transfer payments. The Liberal Party and its federal candidates will have to deal with that when the New Democrats confront them in the next federal election and challenge them on that issue. But you cannot fool them into thinking that somehow Mike Harris and his gang here have become champions of public health care, because they know what you've done to public health care. They know that you've pulled the rug out from under it, you've gutted the funding of it, you've shut down hospitals, you've fired nurses, you've left what nurses are left in our hospitals incredibly stressed and overworked and frustrated. You've put families in positions where, yes, they endure shorter and shorter hospital stays and then more and more incidences of post-operative infection and other diseases, which mean going back into the hospital. That's what has happened. That is happening to families in my communities, and that is happening to families in your communities if only you'd be candid about it, if only you'd be straightforward about it.

**Ms Mushinski:** They want to get out. Believe me—

**Mr Kormos:** Oh, believe me, I visit those people. I'm with those folks in the hospital, lying on gurneys in emergency rooms waiting to get into a room and then, in their hospital room, being told, "You're out." I'm with those people. If seniors don't have kids who are able to take care of them and take them into their home, they're in serious trouble, because your home care services are pathetically inadequate.

Every time there is a radio talk show about it or a television phone-in talk show and you people are on a panel, you are inundated with horror story after horror story of senior citizens or recuperating post-surgical patients who are put into a deteriorating condition because of your failure to provide adequate levels of home care, or indeed even more desperate positions where they are forced into institutionalization where they're denied the independence of living in their own home.

Audiologists: You continue to play games with audiologists in the province. You continue to force them to play a little bit of sleight of hand, where rather than treating people directly in a huge demand for their services with an aging population and among the youngest people in our communities, you remain thoroughly unresponsive to audiologists and their request to participate actively and in a far more efficient and cost-effective way in the health care system.

I'm not about to let the Liberals off the hook and neither are the folks of Niagara Centre. But, by God, I'm not about to let you guys off the hook either. Let me tell you, my friends, this is the pot calling the kettle black. You guys are but co-conspirators of the Chrétien Liberals and their slashes to health care. In fact you guys are the originators and the authors of the sorts of policies of lower taxes for the rich and less money for education and health care. Pay for lower taxes by gutting health care. That's what this government is all about. The people of Niagara Centre understand that fully. They understand it well, and they don't like it a bit.

**The Speaker (Hon Gary Carr):** Further debate?

**Mr John O'Toole (Durham):** It's my privilege to move adjournment of the debate.

**The Speaker:** Is it the pleasure of the House that the motion carry? Carried.

COLLECTION AGENCIES  
AMENDMENT ACT, 1999

LOI DE 1999 MODIFIANT  
LA LOI SUR LES AGENCES  
DE RECOUVREMENT

Mr O'Toole, on behalf of Mr Runciman, moved third reading of the following bill:

Bill 37, An Act to amend the Collection Agencies Act / Projet de loi 37, Loi modifiant la Loi sur les agences de recouvrement.

**Mr John O'Toole (Durham):** I will be sharing my time with the member for Erie-Lincoln, if it's the pleasure of the House.

I could read the explanatory note from the bill itself. It's a very simple bill. It has been out for public hearings.

"The bill amends the Collection Agencies Act to remove the non-resident restrictions for individuals or corporations that carry on business as a collection agency. The bill retains the requirement with respect to the place of incorporation of a corporation that carries on business as a collection agency."

Ontario is the only jurisdiction in Canada with this kind of job-growth barrier. This change would reduce red tape, attract foreign investment, create jobs and improve Ontario's competitive position. I urge all members who have participated in this debate to support the bill. With that, I'll share the remaining time with the member for Erie-Lincoln.

**Hon Tim Hudak (Minister of Northern Development and Mines):** I'm very pleased to rise in the House today and support Bill 37, the Collection Agencies Amendment Act, speaking today as the proud member for the riding of Erie-Lincoln. I'm very pleased with this bill because it directly impacts people of Erie-Lincoln in a very positive way; in fact, 250 or more new jobs directly because of this bill.

1720

Oftentimes we have the pleasure of rising in this House to address legislation that this government has

brought forward to improve the lifestyle of working families across the province and help give them tax cuts and provide for better quality education to make Ontario a better place to live and raise a family. But not often enough have I had the chance to address a particular bill for the riding that affects Erie-Lincoln directly—many bills that have helped move the province forward, that helped build prosperity in Niagara, a remarkable turnaround in the peninsula. But this bill is particularly important for Niagara, for the riding of Erie-Lincoln and for my hometown, Fort Erie, Ontario.

I want to commend the Minister of Consumer and Commercial Relations, Bob Runciman, for bringing this bill forward to the House today. He introduced it in the last session and it went through some public hearings recently, and now back into the House for third reading. As my colleague said, I encourage all members of the House to vote in favour of this bill, because it does mean additional jobs, 250 or more, in the riding of Erie-Lincoln.

I was going through my clippings when this bill was first introduced in the House in late December 1999. The Tribune carried the good news with a headline, "Up to 250 may be Hired by Fort Erie Collection Agency."

"Changes to Collection Agencies Act would allow First Delaware to Expand," an article by Kevin Harding, a reporter for the Niagara Falls Review. A quote in there from Ian Sellors, the president of the company said he "has already added more than 50 employees and is still actively recruiting in anticipation of the amendments and the investments that could flow from them. In all, Sellors said his company will add up to 250 employees," in the riding. In fact, the first paragraph of this good news article says that the Fort Erie-based company "could increase its staff fivefold" as early as the upcoming year when this act is passed by the Legislature.

When this bill came down to Niagara for some public hearings, some positive quotes came forward that I was pleased to see in Hansard. Dan Patterson, the president of Niagara College, at the committee meeting in Niagara Falls had this to say, "Niagara College is ready and able to meet the training needs of all call centre companies, such as Great Lakes in Fort Erie, which is expected to create up to 300 jobs, if not 500, as a result of Bill 37," this bill.

Also appearing there, Fort Erie mayor, Wayne Redekop. As the member for Niagara Centre knows, he's not exactly a raving Tory supporter, but nonetheless Mayor Redekop had this to say: "I encourage you to approve Bill 37 so that we can foster future investment in the creation of good-paying service sector jobs for the residents and taxpayers of communities across Ontario." The mayor was speaking on behalf of council and the strong feeling in the community that they would like to see this bill move ahead for more jobs in the area. I'm very pleased the mayor took the opportunity to go before those hearings and make that known, in addition to Niagara College, and other groups as well who appeared at the public hearings.



Important to me as well is something that I've been working on as the representative for Erie-Lincoln for the past couple of years. I had business in the north, as my ministerial duties, but I had the opportunity to write to the Chair of this committee, Marilyn Mushinksy, when they were considering the bill. In the letter it said:

"By eliminating regulations that prohibit foreign ownership restrictions, credit collection firms such as First Delaware Creditors Alliance of Fort Erie will gain access to foreign investment and be able to proceed with expansion and job creation plans. In Erie-Lincoln, this will create immediate employment for up to 250 people." I guess the letter was well received. The committee moved the bill back into the House.

I have a letter from April 1999 to Minister Runciman and one from September of last year to his predecessor, Minister Tsubouchi, encouraging the government to look at necessary amendments to the pertinent legislation that will best encourage competition in the collection services marketplace to encourage the creation of up to 250 jobs in the Fort Erie area. I said to Minister Tsubouchi at the time that I believed these amendments would be perfectly consistent with our government's efforts to encourage investment and job growth in the province of Ontario.

So some work has been done locally. I'm pleased to have the council on side and I'm pleased to have Niagara College on side and seeing this bill moving through the House and here for third reading today.

In reviewing Hansard, I noticed two main arguments that had come from across the floor. There's the classic argument. We sometimes talk about the red scare. I would call it the red, white and blue scare, the scare that the Americans are going to come in and take over and head right across the Peace Bridge with all the wealth from Ontario. I guess maybe this fear could have been genuine under the previous governments when taxes were increasing and red tape was being rolled out instead of red carpet, when jobs were being tossed across the border. I remember many jobs lost in Erie-Lincoln to America or competing jurisdictions, in the early 1990s especially.

But I see a totally different Ontario today, an Ontario ready, able and willing to take on the Americans one on one in job creation, an Ontario ready to take on the world and an Ontario that's winning, with record job creation in this province and a remarkable turnaround in the Niagara Peninsula, from about 14% unemployment down to under 7% today.

I don't see that fear. I welcome the challenge to take on the Americans, because I know that the competitive spirit in this province is willing to take on the Americans. I think we're going to see jobs coming to Fort Erie and to Ontario from other jurisdictions, not the other way around—a reversing trend, with wealth and jobs coming across the Peace Bridge into Fort Erie.

The other argument I hear—and I'm disappointed when I hear this—is the notion that these are bad jobs, that somehow it's beneath the opposition parties, perhaps, to consider these jobs. Of course, in the previous

government, the fastest-growing job sector was on the welfare rolls. Maybe if you knew somebody, you could get a job as an apparatchik in the government or someplace like that, but job creation in the Niagara Peninsula in the previous years was none; in fact, it was negative.

I reject that totally. These are jobs—some paying \$10 an hour and more with incentives, with an opportunity to climb up that ladder.

#### *Interjections.*

**Hon Mr Hudak:** Of course the Liberals are jeering at that, which is easy for them. They're making about \$80,000 as members of the opposition; it's easy for them to criticize these jobs. But there are going to be 250 people who have the ability now to call home to say that they got that job, to begin putting bread on the table, to begin making savings, making investments. I feel that these jobs that are being created in Fort Erie are very important for the economy. I know the opposition rejects this kind of job creation, but there are 250 new families that are going to have breadwinners again in the home, moving forward. That is why I encourage all members of the assembly to vote in favour of Bill 37 and see it pass into law.

**Mr Mike Colle (Eglinton-Lawrence):** It's certainly our opinion on this side of the House that we thought the thrust of this bill was quite positive. I just couldn't believe how cheap the junior minister from Fort Erie got on this bill—an opportunity to show that there was an opportunity to work together, and he starts preaching to us from his limousine. He doesn't tell people he makes \$120,000 a year and he's got a staff of dozens of people. It's easy for him to preach to us from the back seat of his limousine. I wonder how many people in his riding drive around in limousines.

I think it's not an opportunity here tonight to preach; I think it's very important to realize that sometimes governments have to try and accommodate things that are positive. We're not talking about building a university in Fort Erie or building some auto plant; we're talking about a collection agency expansion.

**Hon Margaret Marland (Minister without Portfolio [Children]):** You used to drive around in your limousine as a councillor, for heaven's sake.

**Mr Colle:** You're wrong. Maybe in Mississauga they had limousines but not in Toronto, sorry. We didn't have limousines. I was very proud to drive around on the TTC.

#### *Interjection.*

**Mr Colle:** Just to tell the member from Mississauga South, I love the streetcars of Toronto; I love the buses and the subway. They're very, very efficient. Your government is the only government in the western world that doesn't subsidize public transit. Your provincial Harris government should be ashamed of itself because it no longer funds public transit. It's your government that has downloaded the cost of public transit on to the property taxpayers. If you go to Europe, if you go anywhere in the world—the Far East—public transit is subsidized by the provincial/state government. In Ontario now, public transit is on the back of the property taxpayer. That is shameful.

1730

So the member for Mississauga South, who's used to her limo in Mississauga, doesn't appreciate public transit here in Toronto. Let her stand up and say that it is wrong for her government to abandon public transit. If she really cared about clean air and the GTA and our traffic gridlock, she would stand up and condemn Mr Harris for cutting transfer payments to much-needed public transit. That's what she should stand up and say. But from their limousines they find it very difficult to have any kind of empathy with ordinary people, who are on the buses, who are on the streetcars, who are on the subways of our cities and towns. It's about time the member for Mississauga South stood up for public transit and stopped supporting her limousine supporters. It's about time she made a cut with those limousine-type supporters. The ministers who drive around in their limousines all over this province preaching to us—

**Hon Jim Wilson (Minister of Energy, Science and Technology):** I don't have a driver.

**Mr Colle:** If you don't have a limousine, what are you doing with one? Then get rid of it.

**Hon Mr Wilson:** I have a Honda.

**Mr Colle:** Get rid of your limousine. Get rid of your limo.

**The Speaker (Hon Gary Carr):** Take a seat. Order. We're at the end of a long week. We have about half an hour to go. Let's try to remain calm as we wind down the week and have a little bit of order in the House and not shout at each other across the floor. Member, please continue.

**Mr Colle:** If the member from Simcoe north, the Minister of Energy, Science and Technology, is so interested in making an example, let him move a motion that all ministers get rid of their limousines. If he is really trying to set an example, I'll certainly support his motion to have them drive their own cars and get rid of their limos. I'll support that. We're willing to do that. If he drives a Honda, I commend him for that. I know he has a very good Honda plant in Alliston, and I commend the people who work there. It's a great place. I have a lot of good friends in the area around the Honda plant, in Alliston and Tottenham and so forth. So if he drives a Honda, great, but I wish other ministers would drive Hondas and not be in the backseat of limos.

To get back to this bill, this bill is basically an attempt to get rid of an encumbrance to a legitimate activity by entrepreneurs here in Ontario to facilitate a growth of employment opportunities in the Fort Erie area. I'm certainly advising my colleagues to support this bill. We've had good hearings, and in fact I think everybody who spoke on this bill was supportive of the bill. There were no negative comments about it; generally very supportive of the fact that some of the courses are going to be offered to upgrade the skills of some of the employees working at the call centre, in conjunction with Niagara College, and I think that is very much a plus in terms of the initiative undertaken by the individuals who in essence brought this work to Fort Erie.

The junior minister from the north got into his buck-passing, as the Tories always do, and cheap political shots. As I said, we looked at it. We were skeptical at first. We were glad when they had public hearings, and we had a good airing of the bill. There were some very good questions and answers. In total, this bill does, as I said, create a call centre that will create—they're not the highest-paying jobs in the world, but they are good-paying jobs. In fact, our research shows that the jobs promised in Fort Erie are actually going to pay considerably more than the average wage, which is usually minimum wage in these call centres, and they have a lot of turnover as a result of that. So the assurance we have here is that the call centre jobs are going to be maybe 25% more than the usual wages paid, and I think that undertaking that has been given to us in this attempt to get these jobs into Fort Erie is a very positive, proactive initiative.

I don't think the junior minister from Fort Erie is saying that we don't have the right in opposition to ask questions. When a bill is presented, whether it's this bill, which is quite minor in terms of volume and so forth, it is our job as members of the opposition to ask questions. There were questions about the privacy aspect of this bill. There were questions about the impact it might have on maybe American firms displacing Canadian firms. Those questions were asked. I know members of the third party asked those questions, and that's their job. For the junior minister from Fort Erie to basically condemn us for raising questions and seeking answers is typical of this neo-conservative government, which has the mindset that they know everything. They don't want to ask questions, and they just do as they're told. Well, on this side of the House, we don't do as we're told. We are free to ask questions.

Within our caucus we ask questions about this and other bills, and there's give and take. We went through this bill. Our members, like the member from Brantford, asked very good questions of the deputants and got some good answers. I know the members on the other side laugh at that process. They don't believe in process. They believe in basically marching to the party line and marching to whatever orders they get. I think it makes for much better legislation, and makes for a much better province, when the people of Ontario and their representatives in this House ask legitimate questions.

That was done on this bill. At the outset we had some reservations. But getting some very good information from the participants, from the citizens of the Fort Erie area, we were able to come to the conclusion as members of the opposition that we would support this bill. In fact we would support its speedy passage, because most of the loose ends have been taken care of to our satisfaction.

I hope the junior minister for northern affairs from Fort Erie will get down to maybe listening, and maybe recalling that members of this Legislature, like the citizens of Ontario, have the right to question his government. He should never forget that is a right people have been fighting to get for hundreds of years, going back to



the days of William Lyon Mackenzie here in Ontario and the members of the movement to reform government against the Family Compact. So it's a long-fought tradition that we have the right to question, a right to oppose and a right to come to our own conclusions.

In this case, as I said, we agree with the government's initiative. We hope we can proceed and get this bill passed so we get the jobs in the call centre in Fort Erie and this whole industry maybe improves itself and takes the lead from this company that says they're going to try to improve services in the very difficult business of collecting money from people who, for good or bad reasons, have been unable to pay their bills. I think it's a positive initiative and that we should proceed in that direction. Certainly that's how we feel on this side of the House.

**The Speaker:** Further debate? The member for Niagara Centre.

**Mr Peter Kormos (Niagara Centre):** As I understand, it's essential that we rotate; is that correct? Was I not here when the opposition members agreed to share their time?

*Interjections.*

**The Speaker:** I'm sorry. I didn't hear the member say he was going to share the time. If that's the agreement, then—

*Interjections.*

**The Speaker:** OK, it's an oversight. The member for St Catharines then.

**Mr James J. Bradley (St Catharines):** I'm going to be very brief on this. I agreed to a five-minute limit on my speech which, as members of this House know, is very difficult for me.

I did want to say, though, that these jobs are coming to Niagara without a megacity. Dr Andrew Sancton's new book, *Merger Mania* which, for my friend Mr O'Toole's edification, is from Price-Patterson Ltd of Westmount, Quebec, talks about why all these maniacal—I know Hansard will get it right—mergers that are taking place are in fact unnecessary. Fort Erie, without being part of a megacity, was able to secure these jobs for people in our area. I know that many people, particularly those who are involved in the debate—and heaven knows why the debate is going on right now in Niagara. Somebody is prompting it. It might be the editorial board of the *St Catharines Standard*. I don't know. But they should read *Merger Mania: The Assault on Local Government*, by Dr Andrew Sancton.

I'm the glad the questions were asked. It's good to have it go to committee, because your assurances are sought and your assurances were given in this particular case that net-net it would be a good thing for the Niagara region.

1740

My friend the member for Erie-Lincoln, the Minister of Northern Development and Mines, mentioned Dan Patterson, the president of Niagara College, and he was quoting him. Well, I was thinking, Dan Patterson—Mr Speaker, you would know this—is probably saying,

"Where's the money?" because many grants were made from the SuperBuild fund. Two different organizations, post-secondary institutions of education, in our area made application, Brock University and Niagara College. Both made a compelling case for funding from the SuperBuild fund. They did not receive it, for whatever reason. I guess the criteria were not what the government wanted in that specific case. We know there is some subsequent funding that will be coming, and we're very confident and hopeful that that justified funding will come. I know that's why he quoted Dan Patterson, because he probably knew Dan Patterson was concerned about it.

There is something else happening in Fort Erie we should know about, particularly the law-and-order crowd over there and the family values crowd. That is, you no longer call it Fort Erie Race Track; it's now Fort Erie slots. So you've got people in there instead of looking at the horses and knowing that it's a game where there are horses running and there are animals being looked after and groomed and so on. The old traditional area of Fort Erie Race Track is a very nice area. Now we have Fort Erie slots. So you go and sit there and play the slots, mindlessly, endlessly, hour after hour, playing the slots. This government gets the money from that. I know the family values crowd over there, people genuinely concerned about families, will know how detrimental this is to families, and they will also know that they're bleeding money from the most vulnerable people in our society. When I used to say they wanted them in every bar, in every restaurant, in every corner store and so on of every community in Ontario, I didn't know they meant in every race track too. But I have promised I would only be five minutes, and I'm going to adhere to that promise and say that our party will certainly be supporting this piece of legislation.

**Mr Kormos:** I'm a little embarrassed, because I had made a commitment, at the finalization of my comments on this bill, to put the question, and I intend to keep that commitment. However, the commitment I received was that I would have, although I'm entitled to an hour to address it, 30 minutes, not a minute more, and I didn't expect a minute more. So now we're getting into a little bit of trouble in terms of the time, I understand that, and I quite frankly was considering changing my position. But unfortunately the member for Erie-Lincoln chose to approach this bill, in his speaking to it today, in a manner that is in no way conducive to good parliamentary practice and in a manner that does not reflect well on his constituents or the people of Niagara.

I agree with the member for Erie-Lincoln. We need jobs in Niagara, now more than ever. E.G. Marsh just shut down, down in Port Colborne, 50 good jobs gone. It did. How long has it been there, Mr Bradley, E.G. Marsh, how many decades? Fifty good jobs, skilled trades people, and I know so many of these workers. Not only were they born and raised in Port Colborne and Niagara, their parents were born and raised in Port Colborne and Niagara. E.G. Marsh seemed solid as a rock. It had a long

history in the region. It did ship engineering and outfitting down at the south end of the canal. Fifty jobs gone, and what's even worse, these workers are at the end of the lineup when it comes to collecting their vacation pay and, for most of them as I understand it, back pay still owed them, because the company is bankrupt. They can't even access the old employee wage protection plan. Do any of you remember that? You should, because you repealed it, you repealed the small fund that was available to workers like the workers at E.G. Marsh with families, mortgages, kids and expenses, who had the expectation of a job for a career. They don't even have that modest employee wage protection plan to access now. They have to line up behind the other creditors. Well, you know where a worker is when there are preferred creditors and lien holders? The worker is at the back of the line. You guys put him there. So we need those jobs in Niagara. We need those jobs.

Now, Mr Hudak—sorry, the member for Erie-Lincoln, who is Mr Hudak. I want the record to make that clear. I commend the Minister of Consumer and Commercial Relations, who approached me about this in the fall of last year. Mr Weese from GE Canada approached me about it. The Minister of Consumer and Commercial Relations—and I don't criticize him for it—did not have a lot details about it, but Mr Weese from GE Canada was helpful and contacted me several times. I quite frankly assured him that we would look at it, that we were very sympathetic because of the jobs issue. We had some concerns.

I remember one effort to telephone the member for Erie-Lincoln so that I could speak about those concerns. But he was a minister, and he didn't answer my phone call. I couldn't talk about these things with him. We have a common interest. He represents a riding adjacent to mine. I have as much concern about jobs in Erie-Lincoln as I do in Niagara Centre. I'd say that's uncharacteristic, because most of the members of this cabinet, the more mature members, although I disagree with them on so many issues and in so many areas, have been responsive in terms of telephone inquiries, not only to me but to my colleagues, and I know because I've talked to them.

Have I and other members of the opposition raised concern about \$10-an-hour jobs replacing \$25-an-hour jobs? Of course we have. We'd be irresponsible if we didn't. But to attack members of the opposition for raising those very legitimate concerns, I find very unfortunate. To attack members of the opposition for engaging in—what was the rhetoric?—some sort of blind, anti-Americanism, I find unfortunate. I find those attacks unfortunate because they didn't have to be a part of the debate.

But when a member of the cabinet, which the member for Erie-Lincoln is, attacks me in that way, I have to respond, don't I? I have to clear the air. I can't let a cloud hang over this issue. The government proposed hearings as part of the committee process during the break between Christmas and April 3. We had one day of hearings. It wasn't advertised very well, but it appeared that that was sufficient and I acknowledge that.

Niagara College—Dan Patterson, president of Niagara College—would run a program where they train people to work in call centres. Call centres have become a major employer in Niagara region just like they have in Sault Ste Marie, Sudbury, certainly eastern Canada, New Brunswick. Remember New Brunswick scooping call centres? They subsidized them, getting into those bidding wars. They've become a major employer, primarily because of a couple of things: (1) the technology—Bell telephone or Nortel, whoever does that kind of work—these communities now are wired in; (2) because the phenomenon of the use of call centres has proliferated, has become that much more prevalent.

1750

I will tell you, yes, I am concerned. The 50 jobs at E.G. Marsh just a couple of weeks ago down in the riding of the member for Erie-Lincoln are but the most recent of serious job losses in Niagara. There's Union Carbide, 300-plus workers in Welland, at value-added manufacturing. Do you understand why I mention these as value-added manufacturing jobs? This is how wealth is created. You don't create wealth in a casino; you don't create wealth at a slot machine. You create wealth by taking things—resources, materials and human skills—and making things out of them. You create value more so by manufacturing car components, because there are more value-added components there than there are in the mere assembly.

I'm very concerned when I see our economy in Niagara, during the period of Tory rule, descending from a value-added manufacturing, high-wage economy to a low-wage economy that is primarily service sector. Do I denigrate these jobs? Please. The suggestion of that.

Canadian Tire Acceptance in Welland is the city's second-largest employer, I'm told, with some 600 employees, second only to Atlas Steels. I've been in that place, I've met their workers and I know their families. I've been in these workers' homes. But I've also had those workers in my office after they've suffered carpal tunnel, as middle-aged women, more often than not. You see, they don't have any workers' compensation coverage because it's considered a financial institution. Is Canadian Tire Acceptance very good about ergonomics and creating a healthy workplace? Yes. I give them credit for that. I tell you, they are. But does that prevent the phenomenon of carpal tunnel? You're talking about people working at keyboards all day. You understand what I'm saying, don't you? We're talking about people working at keyboards all day. As you age and as you continue in that work, carpal tunnel becomes very difficult to avoid, even with the best of ergonomics.

*Interjection.*

**Mr Kormos:** Please. I know you've had carpal tunnel sufferers in your constituency office just like we have in ours. It's neither something to mock nor deride nor belittle. It's an incredibly painful and crippling condition.

The fact is that in most workplaces in Ontario, thank goodness, people who suffer from carpal tunnel or any other sort of industrial injury or disease have a right to



access workers' compensation. But in the call centre industry they don't, by and large.

My concern is the way the member for Erie-Lincoln chose to attack the opposition members and accuse them, suggesting in a very clear way—if I'm wrong, somebody please, on a point of order, stand up and say I'm incorrect. I think the clear inference to be drawn was that it was Mr Bradley and me, because Mr Bradley and I, as the two regional members, spoke out on this in the first instance, and Mr Levac, who is the critic, with the member for Hamilton, was down at the committee hearings. I think the inference to be drawn was it was Mr Bradley as well, and if I'm wrong and there was a suggestion that we were belittling these jobs, somebody should stand up on a point of order and explain that I misheard that.

It's unfortunate. I suppose I could have addressed the concerns I continue to have, notwithstanding what I expect will be my caucus's support. This part of the Collection Agencies Act became law in 1974 when then Minister of Consumer and Commercial Relations for a Conservative government, one Mr John Clement—who of course has done well in terms of his family, and his family has done well. I know John Clement, a very bright man and a very responsible one. He, with all-party support back in 1974, introduced the prohibition of more than 20% foreign ownership of collection agencies. I appreciate that they did that without any anticipation of (1) free trade, (2) the phenomenon of call centres and (3) perhaps a different style of collection agency than the style of collection agency that GE Canada, if they acquire this new operation, proposes to be.

The member for Erie-Lincoln could have done this so quickly and so effectively and in such short order. The member for Erie-Lincoln could have had the thoroughest of co-operation. The sad thing was the sort of silliness that took place at the committee hearings as well. There was some red-baiting going on—totally outdated, the sort of stuff that I recall as a kid but I thought responsible people had long grown out of. Some people, myself included, expressed concern about the nature of the economy and the low-wage jobs, about the fact and the observation that this country doesn't have a brain drain, it has a profit drain. Yes, people should be concerned about foreign ownership.

I acknowledge readily that nobody else came forward. This is part of the problem: Originally the association, the lobby group, the organization of Ontario collection agencies had concern about deleting this part of the act, I suppose because they thought it would create elements of unfair competition or intrude. It's our job to protect Ontario companies, isn't it, Mr Murdoch? If we don't do that, we're being irresponsible.

**Mr Bill Murdoch (Bruce-Grey):** It sure is.

**Hon Frank Klees (Minister without Portfolio):** On a point of order, Speaker: I would request unanimous consent for the House to continue sitting until 6:15 to allow Mr Kormos to continue his debate, as we had agreed, to allow him the full 30 minutes of debate.

**The Speaker:** Is there agreement on that? Agreed.

**Mr Kormos:** Thank you kindly. I, of course, didn't have to agree to that. I would have preferred an apology from the member for Erie-Lincoln—not to me, but to his constituents—for darned near screwing up the passage of this bill. But Mr Klees, to his credit—and I suspect more so to his staff's credit, no disrespect to you—found a way to resolve what could have been a modest impasse. Mr Klees indicates it was his idea and his alone. That's why he would have been a good federal leader: that sort of good judgment, the ability to respond promptly. I know Mr Klees, and I know that beneath that right-wing exterior lives somebody who adheres to long-standing, perhaps even socialist, principles. He puts on a show, but inside he's a different man than what he purports or presents himself to be on the outside.

The issue of profit drain, not brain drain, should be of concern. Collection agencies in their own right are not one of the pillars of financial institutions. They rank with the car insurance industry as being the poor country cousins, or at least have historically. Mind you, we're talking about GE Canada here, part of big GE. GE is no longer primarily in the business—understand this—of making lightbulbs or television sets or transformers.

**Mr Murdoch:** Do they make anything?

**Ms Kormos:** Mr Murdoch astutely questions, "Do they make anything?" They make money. What do they make? They make money.

**Mr Murdoch:** That's part of being in free enterprise.

**Ms Kormos:** They're not in the job creation business, let's understand that. The board of directors of GE doesn't sit down and say, "OK, where are we going to create some jobs this week?" Again, I understand that.

**1800**

Let's be very careful. I saw an announcement the other day; a major automobile manufacturer announced this job creation project. Please. A car manufacturer's job is to make profits. If to do that they have to employ people, well, they will, but let's not be naive. You don't have to be a socialist to understand that principle. You don't have to be. Indeed, it's one of the fundamentals. I understand that. If the shareholders of GE discovered that GE was out on some orgy of job creation without any consideration of maximizing profits, why, there'd be all Hades to pay at the next shareholders' meeting, wouldn't there? "Are you guys nuts? Creating jobs? You're supposed to make money." Let's understand that's the corporate world.

We need jobs in Niagara because our high-wage industrial jobs have been torn out of Niagara by Mulroney's free trade, then worsened, heightened, by the NAFTA agreement and by, granted, many shifts in simply the style of product that's being manufactured. We're witnessing and suffering this transition from high-wage economy to low-wage economy. I tell you, it is impacting on every facet of our community. It's impacting—

**Mr John Hastings (Etobicoke North):** Where have you been? It's the Internet economy now.

**Mr Kormos:** The Internet economy, he says. Yes. The only profits being generated are on the stock market, where the speculators are pocketing huge profits. Have any of those companies made a single profit yet? See how they can distract me, Mr Klees?

We've got a problem with the types of jobs that are occurring in Niagara. People are desperate for the casino jobs, the racetrack, the slot machine jobs, because people have been losing good jobs over the course of the last five years. Yes, the operators of the de facto collection agency in Fort Erie, the one that's being purchased by GE when this bill passes, explained it was approximately \$10 an hour. I suppose if you're fresh out of high school or college and you're single and maybe you're still living with your folks, 10 bucks an hour is all right. If you're working a 40-hour week, that's \$400 a week. My God, that's \$20,000 a year.

Where do you people come from? You don't raise families very well on \$20,000-a-year incomes. Let's be clear. These are McJobs, jobettes. Let's not delude ourselves into thinking that these sorts of jobs at the slot machines or in the casino or in the call centres are going to replace value added manufacturing, high-wage industrial jobs that had been the mainstay of Niagara.

Now there's some hope. The trade union movement has been working with various call centres, most notably in northern Ontario, if I recall, in an effort to unionize them. I think that's an important thing. I'm not denying the profitability of the call centre phenomenon. But as these workers organize themselves into collective bargaining units, they may see their wages increase and working conditions improve—for the bad ones a lot, and for the very good ones maybe a little bit better—and they take home some of the wealth and some of the profits they create. Then again, I'm still waiting for the casino to be organized too, Speaker, because that's long overdue, a casino that's generating revenues of millions and millions of dollars a year and the workers receiving crap wages and even worse treatment in their workplace.

One of the pleasant things about our committee hearing—and I want to put this on the Hansard record. I asked Mr Weese to make the observation that indeed people in call centres tend not to be covered by workers' compensation. I raised that with Mr Sellors, who transferred it over to Bob, and Mr Weese said this: "If the law required us to have our employees at Fort Erie covered by workers' compensation, I don't frankly think that would be a huge problem for us." I asked him if he'd help me in campaigning for it. It's in the transcript of the committee hearing. He was a little equivocal at that point, but he said, "We certainly won't oppose it."

I want you folks to understand that when the legislation is brought by way of a bill in this House to amend workers' compensation to include workers in the financial sector, the advocates of that workers' comp coverage have an ally in GE Canada, that their own vice-president spoke on record as saying he won't oppose. He's the vice-president for GE Canada. He makes a whole lot of money and has a whole lot of control over GE Canada,

and what he doesn't make in salary he makes in bonuses. I'm eager to have Mr Weese on side when it comes to extending workers' comp to financial service workers, to his workers in collection agencies.

We were assured that the organization of Ontario collection agencies had abandoned their position of concern about this bill. I remain concerned about the claims. That's why it was important to have the committee hearing, so that Mr Weese could go on record, because he talked about creating a couple of hundred jobs—well, please, about a couple of hundred jobs flowing as a result of his investment and the transfer of files, accounts, to the operation in Fort Erie.

I quite frankly think Mr Weese is an honourable person, but I wanted to hear him say it on the record, because I want people to understand why I will support this bill, with some concerns, as I say, about the profit drain. It's not that I mind these jobs. What I do mind is the leveraging that happens all the time: "Oh, if you don't take these jobs, you've got to be somehow anti-job." Of course not.

**Mr Murdoch:** That's only posturing.

**Mr Kormos:** Mr Murdoch says it's only posturing. Yes, it is. Well, then, can I say, "Cut the CCRAP," if that's the name of the political party? That's my first response, is to cut it. I resent that, because yes, there are people in this province who are concerned about maintaining a high-wage economy. I'm one of them, because high-wage economies support small businesses and provide a broader-based prosperity. Low-wage jobs in low-wage economies, the hallmark of this government, create poverty and despair and limit young people's futures rather than expand their futures.

So I am an unashamed advocate of high-wage economies and high-wage jobs, and I believe that workers should make their fair share of the wealth they create and the profits they create. I don't believe that by creating a small group of wealthier and wealthier people who spend their money in Monaco or in Paris at the Ritz-Carlton, people who can play the tables in the Grimaldi palace—that creating that kind of class of people at the expense of others creates a healthy society or a healthy economy.

I believe that workers have a right to organize, and I believe that many workers, especially with these types of employers, are far better off organized, because they are dealing with very powerful companies. GE Canada, a part of GE International, is one of the most powerful companies in the world, controlling wealth and assets greater than many countries in the world. GE is more powerful than many of the world's countries, and little workers have to fight with them and are expected to compete and be grateful for \$10-an-hour jobs.

I am going to support this legislation. I hope it doesn't come back to haunt us. I hope it doesn't. I hope the member for Erie-Lincoln is prepared with an explanation should there be an announcement a year hence saying, "The operation is being moved by GE into its United States jurisdiction."

**Mr Murdoch:** That's good.



**Mr Kormos:** Aha, Mr Murdoch, yes. Because I've been assured that it won't. I'm not the one who has to explain to constituents in Erie-Lincoln why it is. I'm concerned about that, because that increasingly open border facilitates that. I'm concerned about the profit drain. I am concerned about American and other foreign ownership of our economy.

Having said that and expressed my concerns and my disappointment in how this whole matter was resolved, or addressed, I am prepared, Speaker, in approximately a minute and 20 seconds, to put a matter to you. I hope I don't regret having accommodated the suggestion of the

government House leader. I don't think I will regret it. I may regret saying that, but I don't think I will.

I put to you, Speaker, that we now put the question.

**The Speaker:** Mr O'Toole has moved third reading of Bill 37, An Act to amend the Collection Agencies Act. Is it the pleasure of the House that the motion carry? Carried.

Be it resolved that the bill do now pass and be entitled as in the motion.

It being after 6 of the clock, the House stands adjourned until 1:30 on Monday.

*The House adjourned at 1813.*

**LEGISLATIVE ASSEMBLY OF ONTARIO**  
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Beaches-East York	Lankin, Frances (ND)	Hastings-Frontenac-	Dombrowsky, Leona (L)
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Constituency Circonscription	Member/Party Député(e) / Parti	Constituency Circonscription	Member/Party Député(e) / Parti
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Une liste alphabétique des noms des députés, comprenant toutes les responsabilités de chaque député, figure dans les premier et dernier numéros de chaque session et le premier lundi de chaque mois.

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Frances Lankin, Bill Murdoch  
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# Ontario Hansard

No. 39[A]

1st session, 37th Parliament | 1<sup>re</sup> session, 37<sup>e</sup> législature

Mon 10 Apr 2000 / Lun 10 avr 2000

*The House met at 1330.*

*Prayers.*

## MEMBERS' STATEMENTS

### SCARBOROUGH FIRE

**Mr Dave Levac (Brant):** I rise today to once again bring to the attention of the House the serious issue of fires involving dangerous chemicals and toxic materials. I know that all the members of the House join me in expressing our collective appreciation and congratulations to the entire team effort in dealing with the fire at U.S.E. Hickson Products Ltd south of Scarborough. At present, thank God, there are no reports of injuries. The five-alarm fire is a recent event that points to the professional and dedicated way in which our firefighters perform their duties, especially in dangerous situations.

Praise and thanks also go to the entire emergency response team: the police, the ambulance and health officials, the plant managers, and the community for having a response plan to come into action when needed.

This event again points to the need for province-wide expectations and standards to keep our firefighters, police, emergency officials and citizens safe. We need right-to-know legislation now for stored chemicals and toxic materials province-wide. We need a third party independent agency to investigate hazardous work sites, with protective powers for all workers, especially firefighters entering burning buildings with toxic materials.

Again I express my heartfelt appreciation to the firefighters, police and emergency response teams for a job well done.

### BRAMPTON BATTALION

**Mr Joseph Spina (Brampton Centre):** I stand in the House today to inform all members about another one of Brampton's great success stories, the Brampton Battalion of the Ontario Hockey League.

Just two short years ago, the Battalion began their inaugural season in the OHL, led by owner Scott Abbott and director of hockey operations and coach Stan Butler. In their second year of operations, the troops started the 1999-2000 season on a hot streak that saw the team ranked as high as third in Canada and accomplished what many thought was impossible: They made the playoffs. After a difficult, heart-wrenching series with the Erie Otters, the troops fell in six, and questionable calls by the ref allowed them to not make it beyond that. But we have a number of very talented players; among them, rookie defenceman Rostislav Klesla, number two overall for this year's draft, while scoring sensation Raffi Torres ranks seventh among North Americans.

Of course, a team or party can't succeed without strong leadership. Coach Butler built a team from





among the best young talent available, unlike the counterpart--you know, Cherry and the Mississauga Slush Puppies. Butler led the troops from eight wins and 19 points last season to 25 wins and 65 points this year, the fifth best improvement in OHL history.

On behalf of all members and Bramptonians, thank you, Battalion, for a great season. Let's see the Memorial Cup next year.

## HEALTH CARE FUNDING

**Mrs Lyn McLeod (Thunder Bay-Atikokan):** Hearings began on Friday to determine whether Lisa Ann Brady, a 20-year-old with Preador-Willi syndrome, will be able to receive more hours of personal care than the Harris government's rationing allows. Ironically, the cost of the private lawyer the government has hired to fight Lisa--all the way to court, if need be--is likely greater than any settlement Lisa might receive. Why would the government not use one of the 20 or so lawyers already on the payroll of the Ministry of Health? Why has the Mike Harris government brought the full power of the ministry to fight one woman with severe health problems?

Lisa Brady's case is unlikely to set a precedent, even if she is successful. The Health Services Appeal Board is hearing the case only because Lisa's claim predated regulations the Harris government brought in, regulations that were deliberately intended to stop Lisa Brady from receiving the support she needs to live in the community. Maybe the government's concerned that somehow there might be a loophole that would allow Lisa to actually receive the level of support doctors say she needs. Maybe they're concerned that their own appeal board might respond to the needs of the individual before them, notwithstanding the restrictive regulations the government has in place.

I hope that somehow Lisa is successful and that her case does challenge the inflexibility of regulation that limits the hours of care that can be provided, no matter what the individual need. If the government doesn't want to meet the cost of providing individual care in the community, then let the minister say what the alternative is for Lisa Brady and others who need more help than is now allowed. And let the Brady case say loudly and clearly to the Harris government that they cannot continue to ignore the needs of people or silence them with regulations, costly lawyers and threats of court action.

## VIMY RIDGE

**Mr Raminder Gill (Bramalea-Gore-Malton-Springdale):** Yesterday, April 9, marked the 83rd anniversary of the storming of Vimy Ridge in the First World War.

On that day, our four divisions of Canadian soldiers massed as a single, unified force for the first time. They came from every corner of Canada and they spent Easter Monday 1917 fighting to recapture the toughest German strongpoint on the Western Front. Both the British and the French had tried and failed to liberate Vimy Ridge from the Germans, but the Canadians succeeded and, as they did so, they achieved the most glorious military victory in the history of Canada. Today, Vimy Ridge is part of Canada. The people of France deeded it to our young country in recognition of the sacrifice made by Canadians in liberating France.

Consider that over 66,000 Canadians laid down their lives in the First World War. They triumphed in the most inhuman conditions. A new nation emerged from this ordeal. Our soldiers went up the ridge as colonials and came back down as Canadians.

I'm sure every member of this House will join with me in recognizing the valour, the dedication and the sacrifice of the Canadian Army that April 9 at Vimy Ridge.

## ORGAN DONATION

**Mr Ernie Parsons (Prince Edward-Hastings):** My statement today is directed to the Premier and the Minister of Health. An issue of vital concern to the people of this province is the issue of organ donation. Both potential recipients and their families are only too aware that there simply are not enough organs available. There are too many people not aware or not prepared to sign the organ donor card at





this time. I therefore applauded the Premier's initiative last fall to appoint Don Cherry to investigate approaches that would greatly encourage individuals to sign cards consenting to donation upon their death.

There's no question that this is not a simple issue. There are medical, emotional and religious issues to be dealt with. The wisdom of Solomon will be required to determine the best approach to this matter. I believe that, collectively, the citizens of Ontario possess this wisdom. Unfortunately, the input from our constituents will be very limited. In fact, it will be limited to residents of large urban areas and those with money. A most qualified individual in my riding approached me to indicate with pride that she had been invited to meet in Ottawa with Mr Cherry and provide him with information and suggestions regarding this process. Unfortunately, the invitation would require her to take a day off work without pay and to do all of the travelling at her own expense. This is simply not possible in her case, so the citizens of Ontario have lost the opportunity to benefit from her knowledge and experience.

Surely we do not want knowledge just from those who have money. We have health care money for wasteful media ads, but we have no money for health care.

#### **WOMEN'S RIGHTS**

**Ms Frances Lankin (Beaches-East York):** Historically, the Famous Five is a term that referred to five women who, individually and collectively, did great work in improving the situation of women in Canadian society. Together, they initiated the "persons" case, which resulted in women being considered as full legal persons for the first time under Canadian law. What they did was a great thing by Canadians, for Canadians and, I say with pride, a great thing by Canadian women, for Canadian women. These women were Nellie McClung, Irene Parlby, Henrietta Muir Edwards, Louise McKinney and Emily Murphy.

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The "persons" case was an appeal of a ruling of 1876 British common law, which cited the following: "Women are persons in matters of pain and penalties but are not persons in matters of rights and privileges." The offensiveness of that is apparent to all of us today, and the work done by these women in challenging that to the Supreme Court of Canada and to the judicial committee of the Privy Council eventually resulted in the ruling of October 18, 1929: "that the exclusion of women from all public offices is a relic of days more barbarous than ours." To those who would ask why the word "person" should include females, the obvious answer is, why should it not?

Today you presided over a ceremony bringing the maquette and monuments in tribute to these five women, which will be contained on Parliament Hill in Ottawa as of October. We are welcoming of this event here in our Legislature.

#### **NATIONAL VOLUNTEER WEEK**

**Mr Bert Johnson (Perth-Middlesex):** Yesterday marked the start of National Volunteer Week, an annual opportunity for communities across Canada to recognize volunteers and their contribution to our society. Almost one in three Ontarians volunteer with a charitable or non-profit organization. Together, our volunteers dedicate over 422 million hours to serving their communities. Through their kindness and compassion, their sense of responsibility and civic pride, volunteers enrich our quality of life and make our province a place where Ontario families can prosper and thrive.

Ontario has a long tradition of honouring its volunteers. Between now and June, over 5,000 volunteers will receive volunteer service awards for continuous service to a community group. Individuals, groups or businesses that have done exceptional work will receive outstanding achievement awards. Tomorrow, here at Queen's Park, the Lieutenant Governor will present the Ontario medal for young volunteers to 11 young people who have demonstrated exemplary volunteer achievement. These youths have discovered the self-respect, satisfaction and joy of giving to their community. They are the leaders of the new generation of volunteers.





Our government is committed to helping volunteers in their efforts to help others. I ask the members of the House to join me today in recognizing and thanking all of Ontario's volunteers.

## **DAY OF MOURNING**

**Mr Mario Sergio (York West):** On March 17, our community gathered at the subway station at Yonge Street and York Mills Road to pay tribute to the five construction workers who died at this site 40 years ago. These men were trapped 35 feet underground during construction of a tunnel at Hog's Hollow. The disaster happened because of a total disregard for emergency measures and the safety of these workers. In that tunnel of death, they had no flashlights to help them find their way out, no hard hats or safety boots to protect them, no contact with the outside world.

Pasquale Allegranza, Giovanni Correggio, Giovanni Fusillo and brothers Alessandro and Guido Mantella tragically lost their lives in that horrific accident. They epitomized the Italian immigrant worker experience. They had left their homeland with nothing but dreams of a better future and eagerness to work hard so that life could be better for themselves and their families in Canada. The Italian community has not forgotten that it was their ultimate sacrifice that led to stronger workplace health and safety laws.

Although March 17, the Hog's Hollow day of remembrance, has passed, I ask you to join me today in honouring those young men who paid the greatest price of all with their young and vibrant lives. We remember the grief of their families and fellow workers. We remember the shock to our community. But most of all we commemorate the everlasting legacy that ensures protection for all Ontario workers to this day.

## **SCARBOROUGH FIRE**

**Mr Steve Gilchrist (Scarborough East):** Yesterday afternoon, one of the worst fires in recent Toronto history raged out of control in my riding of Scarborough East. The fire, centred in an industrial park in the southeast corner of my community, started at approximately 3:30 and burned relentlessly for almost 12 hours before firefighters could confidently claim to have the situation under control.

The reactions of Toronto emergency service personnel, including fire, ambulance and police, were immediate and thorough. Some 150 firefighters responded to the five-alarm blaze. Despite the danger, Toronto firefighters battled the blaze aggressively, while more than 100 police and ambulance personnel maintained safety and security within the community.

On behalf of every resident of Scarborough East, I'd like to thank these brave men and women who put their own lives at risk for the good of our community. The professional response of emergency services resulted in the fact that there were no serious injuries or deaths, which is a testament to the training each of these individuals has received. I'd also like to thank the media, who worked with emergency services to ensure that our community had the latest and best information available.

Ministry of the Environment officials were on the scene almost immediately to monitor the air and water in the area. The trace atmospheric gas analyzer, or TAGA, system was on the scene last night and will remain there for at least 72 hours. Minister Newman arrived soon after the fire began and was still there late into the early morning. He's assured me that the Ministry of the Environment will take all necessary steps to ensure that the area is monitored and that residents have access to any information gathered. I want to thank the minister and all Toronto emergency services personnel for their immediate action and for guaranteeing that our community was kept safe in the face of a tremendous fire last evening.

## **INTRODUCTION OF BILLS**

### **NER ISRAEL YESHIVA COLLEGE ACT, 2000**

Mr Young moved first reading of the following bill:

Bill Pr20, An Act respecting Ner Israel Yeshiva College.





**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry? Carried.

Pursuant to standing order 84, this bill stands referred to the standing committee on regulations and private bills.

## **FAIR GASOLINE MARKETING PRACTICES ACT, 2000 / LOI DE 2000 SUR L'ÉQUITÉ DES MÉTHODES DE COMMERCIALISATION DE L'ESSENCE**

Mr Crozier moved first reading of the following bill:

Bill 60, An Act to prohibit discrimination in the supply of gas and diesel oil to retail dealers / Projet de loi 60, Loi interdisant la discrimination dans la fourniture d'essence et de carburant diesel aux détaillants.

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry? Carried.

The member for a short statement.

**Mr Bruce Crozier (Essex):** This bill prohibits wholesale suppliers of gasoline and diesel oil from discriminating unfairly between dealers who are affiliated with suppliers and dealers who are not. Unfair discrimination includes wholesaling to affiliated and unaffiliated dealers at different prices or credit terms, and influencing affiliated dealers to set retail prices at or below the supplier's posted rack price to unaffiliated dealers. Suppliers must file their posted rack prices with the director, who must make them public.

## **MOTIONS**

### **HOUSE SITTINGS**

**Hon Frank Klees (Minister without Portfolio):** I move that, pursuant to standing order 9(c)(i), the House shall meet from 6:45 pm to 9:30 pm on Monday, April 10, for the purpose of considering government business.

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry?

All those in favour of the motion will please say "aye."

All those opposed will please say "nay."

In my opinion, the ayes have it. The motion carries.

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## **ORAL QUESTIONS**

### **SCARBOROUGH FIRE**

**Mr Dalton McGuinty (Leader of the Opposition):** My question is for the Premier. I want to begin, on behalf of everyone in the Legislature, by congratulating and thanking all the firefighters and police officers for the courage they showed in fighting yesterday's giant chemical fire.

Premier, those people did a good job and I sincerely wish that I could say the same for you. If not for an unusual southerly wind and if not for the skilled local planning by municipal fire officials, this fire could have been deadly. For well over a year now I have been talking about putting in place on the law books here in Ontario a new law, right-to-know legislation that would make it mandatory for people who store toxic and explosive chemicals to register those materials so that our police, our firefighters and the surrounding communities would know exactly what's inside those buildings.

Premier, will you now take our advice and finally introduce right-to-know legislation during this session





of Parliament?

**Hon Michael D. Harris (Premier):** I think the Minister of the Environment can respond.

**Hon Dan Newman (Minister of the Environment):** I want to begin by thanking all those men and women who were involved in putting the fire out last night in Scarborough. Community safety was the top priority and it was indeed protected with professionalism and bravery. Community safety remains the top priority today.

Currently, my ministry is monitoring the air, water and soil quality for any potential impacts from the fire. A cleanup crew hired by the company is also on site performing tests and cleaning up the runoff. Water treatment plants in the area have been notified by my ministry and they have been asked to enhance their monitoring of the impact. The sampling to date has shown that the plume does not pose a threat to public safety.

**Mr McGuinty:** Minister, I'm not talking about how you reacted and your ministry reacted to this incident. I'm talking about the demand that's being placed on you today for leadership. You got lucky this time. Those people who ran that operation lived in a community where the municipal fire officials insisted on knowing what was inside the building. It's just a matter of time before another one of these fires occurs in another community. I think we owe it to the firefighters, to police and to Ontarians generally to put in place right-to-know legislation so that we can ensure we are doing everything we reasonably can to look after the safety of those people.

Again, Minister, will you assure us that you will introduce during this session of Parliament right-to-know legislation?

**Hon Mr Newman:** Any municipality has the ability to ask the government for that information. In fact, after the Plastimet fire a few years ago recent changes were made to the fire code. Basically, the owner must submit a plan on the type of hazardous materials and what will be done with those hazardous materials, and provide them to the fire department. The fire chief of that municipality actually then approves the plan.

**Mr McGuinty:** Minister, you should know that if this had happened anywhere in the United States there is on the books south of the border legislation that makes it absolutely mandatory that those kinds of toxic and explosive materials be registered and that information is made available to the public, the firefighters and the police.

You talk about mandatory things on an ongoing basis--mandatory workfare, mandatory teacher testing, those kinds of things. When it comes to something of real substance, something that's very important to the public, why could we not introduce here in Ontario right-to-know legislation? It is simply a matter of time before one of these fires occurs in another community which has not taken the steps, which has not required locally that this kind of information be made available.

Again, Minister, it seems to me like a very reasonable request. Why would you not introduce in this Legislature right-to-know legislation during this session of this Parliament?

**Hon Mr Newman:** Rather than grandstanding and introducing bills like the opposition parties have done, we took real action. That information was indeed provided to the people of Toronto. In fact, I was there last night and I spoke with fire chief Alan Speed. They knew what they were doing and they had that information. That's why they were able to fight that fire.

**The Speaker (Hon Gary Carr):** New question/

#### ONTARIO REALTY CORP

**Mr Dalton McGuinty (Leader of the Opposition):** This question is for the Premier. I believe that cabinet ministers should live up to a high standard of responsibility and unquestionable ethical behaviour. Apparently, you do not. We now know of three land flips in which taxpayers got ripped off





for over \$10 million. Two of those deals fell directly under the responsibility of the Chair of Management Board and in the case of the third one the irresponsibility is shared between the Minister of Transportation and the Chair of Management Board. We know that the police have been called in; we know that there is an internal audit being conducted at this time.

Premier, what I want to know is, do you not think that ministers responsible for losing millions of dollars, ministers under investigation, should at a minimum step down while the matter is under investigation?

**Hon Michael D. Harris (Premier):** Actually, I do. Since the minister is not under investigation there's absolutely no reason why the man who brought in the investigation and ordered the uncovering of what is going on should step down. In fact, we should thank the minister and thank our lucky stars he was there.

**Mr McGuinty:** Premier, I want to talk about your double standard. When a staff member of Minister Jim Wilson revealed confidential information, Wilson rightfully stepped aside. Bob Runciman also stepped aside when a matter affecting his ministry was under investigation. Steve Gilchrist, reluctantly but ultimately, did the right thing and stepped aside after the police were investigating him.

Premier, why the double standard? The precedent has been set when it comes to three prior ministers in your own government. Why is that Mr Hodgson finds himself in a special circumstance where you suddenly feel it is no longer the right thing to do for him to step aside pending the outcome of the investigation?

**Hon Mr Harris:** Certainly, neither the minister nor any of his staff is under any investigation. In fact, it is the minister himself who has brought sunshine to this matter. He has brought in the experts to take a look and, on the independent advice of the Ministry of the Attorney General, brought in the police to take a look. So the situations are in no way even close to being parallel. I might add this: that for any Liberal, provincial or federal, to talk about ethics or talk about standards is the height of hypocrisy.

**The Speaker (Hon Gary Carr):** I would ask the Premier to withdraw that word, please.

**Hon Mr Harris:** Yes, sir.

**Mr McGuinty:** Premier, the matter really is too serious for your introduction of bombast. What we're talking about here is the fact that nobody over there, the group sitting on the right hand of the Speaker, the members of the government, is prepared to accept responsibility for this mess. We're talking about the loss of over ten million taxpayer dollars. We're talking about a matter that is under police investigation. You tell me that the minister himself is not under police investigation. That is news. Have you talked to the police on that score, Premier? In that regard you might want to fill us in as well.

It's a matter that's under police investigation. We have an internal audit being conducted. We have a precedent set not only by your government but by others before that. When ministers or people in their ministry are the subject of investigation, police or otherwise, the right thing to do is to step aside. Premier, again I ask you: Why is it that Minister Hodgson is not doing the right thing in these circumstances? Why is he not, at a minimum, stepping aside pending the outcome of the investigation?

**Hon Mr Harris:** The member makes up protocols that I've never heard of, he's never heard of, have never been part of our government, have never been part of his government and have never been part of a Liberal government, I can tell you that, anywhere on this planet that I have ever seen.

You say taxpayers have lost money. We don't know if taxpayers have lost any money. What we know is this: There have been questions raised around some sales for which the minister and the chairman of the ORC have called for an investigation. That investigation is taking place; that independent audit is taking place. That is absolutely the appropriate action, and I'm very proud of the minister and the chair of the ORC for doing that.





## SCARBOROUGH FIRE

**Mr Howard Hampton (Kenora-Rainy River):** My question is for the Minister of the Environment. It concerns the toxic chemical fire at the Hickson plant in Scarborough. This is the third serious toxic fire in a built-up urban neighbourhood that has happened under your government in the last four years. The Hickson plant uses chemicals that contain chromium, copper and arsenic, elements that, when burned, are toxic and emit carcinogens.

Minister, the question is this: Given the history of toxic chemical fires under your government, why do you allow companies to store chemicals like this next door to residential communities without requiring them to inform the residents about the dangers they are living beside, and without taking the steps necessary for an emergency situation?

**Hon Dan Newman (Minister of the Environment):** Obviously the municipalities are aware as to what products are there on the site. In fact, I can tell you right now that the TAGA vehicle is on the scene and is monitoring the air. Any of those levels with toluene, styrene and xylene have dropped dramatically over the last number of hours since the testing has been taking place.

**The Speaker (Hon Gary Carr):** Supplementary?

**Ms Marilyn Churley (Broadview-Greenwood):** Minister, as you know, the efforts in the fire last night were all voluntary. It was put together by the local councillor, fire and some businesses.

I want to ask you, though, about TAGA, the ministry's mobile air testing equipment. It tells residents what is in the smoke and the dangers they might face. Minister, last night I got to the site by 8 pm, only to discover that the TAGA truck was still not there. I called the spills action centre and was told it was on the way. The truck did not arrive until 10:45 and wasn't in a position to test the air until after midnight. It was known by 3:30 that this was a dangerous chemical fire in a residential area. Why did it take over seven hours for the truck to get there?

**Hon Mr Newman:** As the member should know--she served as a parliamentary assistant under the previous government to the Minister of the Environment--the TAGA vehicle is not an emergency response vehicle; if she doesn't, I'm going to tell her that today. It is requested by emergency response personnel at the site of an environmental spill or fire. Following the Plastimet fire in Hamilton, the ministry put standard protocols in place for response arrival time. Ministry officials are required to be on site within two hours of being notified, and the ministry was. The TAGA units are to be on site within four to six hours. Both of these timelines were met last night.

I'm proud to say that Ontario owns two of the most advanced TAGA units in all of North America. In 1998, this government invested \$2 million in upgrading the TAGA units. There are only six units in all of North America, Quebec being the only other province that has one.

**Ms Churley:** I'll say to the minister that it's but by the grace of God last night that the wind didn't change and we didn't have a major environmental and health disaster in Scarborough. You know that, Minister.

We're asking you today to bring in right-to-know legislation. The US Clean Air Act requires some 64,000 sites that store and use chemicals like these to prepare emergency-measure plans and make them available to the public.

Minister, you're way behind. Don't wait for a worse disaster. Learn from this, from Plastimet and from the fire in my riding in south Riverdale. Order an independent public inquiry. We want to see just what went up in smoke last night, what went into the groundwater through the runoff and, most important, what steps should be taken by your ministry to protect citizens against future chemical fires like this.

**Hon Mr Newman:** I want to again point out that the response times in this situation were within the protocol established by the Ministry of the Environment. We're awaiting further analysis from on-site





ministry officials as to any potential environmental impacts.

Since 1995, the Liberals have called for inquiries 69 times on 20 topics, and the NDP have called for inquiries 47 times on 11 topics. I could question the integrity of a party that cries wolf with a knee-jerk reaction.

But I also want to tell you what a former environment minister said about the TAGA units. It was the environment minister in 1986 who said: "The TAGA unit is a machine that takes approximately two hours to assemble, and the technicians have to calibrate the machine to deal with the specific substance. In addition, there is the travel time. We are talking about a machine that is not designed for emergencies." Who said that? Jim Bradley.

## ONTARIO REALTY CORP

**Mr Howard Hampton (Kenora-Rainy River):** My question is for the Chair of Management Board and it concerns the Ontario Realty Corp. This is a transcript from the trial relating to the Keg deal, cancelled by the Ontario Realty Corp at the last minute. It's a transcript from Joe Clasadonte, a marketing coordinator of the Ontario Realty Corp, who says on page 33 of his testimony, "Some time in the late fall or early in 1999, a directive came down that Tony Miele, who is now president or CEO of the ORC, was required to approve transactions, including the one that I was working on." Later on, on page 247, Mr Clasadonte says that he stopped preparing the legal documents for the deal because Tony Miele wanted to review the file.

Minister, do you still deny that Tony Miele had to approve all transactions at the Ontario Realty Corp as of December 1998 or early January 1999?

**Hon Chris Hodgson (Chair of the Management Board of Cabinet):** It's refreshing to hear the leader of the third party admit for the first time that there was no transaction on the Keg Mansion, because you keep repeating that there was. That's a positive sign, and I'm thankful for that.

The second question you raised is around the chair of the board and the board of directors of the Ontario Realty Corp and their delegating and asking Tony Miele to undertake some special projects. I believe the record is pretty clear on that. What you are talking about is before the courts, and that will come out in the fullness of time due to proper process.

**Mr Hampton:** No, Minister, this is about your credibility. I wonder how Mr Clasadonte got the impression, in late 1998, that all deals had to be reviewed by Mr Miele, your appointee. I wonder how he got the impression that what was happening on the Keg deal was in effect going to be stopped because of an order from Mr Miele, when you keep saying Mr Miele had nothing to do with this.

This is sworn testimony and what it amounts to is this: If Mr Miele was stopping this deal and if Mr Miele was reviewing all transactions, how is it that the government, the taxpayers of Ontario, got taken on the Gabriele deal and on the All-City Storage deal? How is it that those deals continued to go forward when there is clearly referred to in sworn testimony a memorandum that says that Mr Miele was supposed to review those deals? And if he did, why did they go forward, why were the taxpayers swindled and where were you and Mr Miele when you should have been performing your duty on behalf of taxpayers?

**Hon Mr Hodgson:** For a party that set up the Ontario Realty Corp, you are fully aware that there is a board of directors, which oversees the day-to-day operations and does the hiring of staff. So you would have to talk to the board of the ORC in relation to Mr Miele's contract and responsibilities. When you talk about All-City Storage, you're referring to 145 Eastern Avenue, which is part of the Ataratiri land. Surely you're not going to start defending the Liberal record on backing the city of Toronto's bid to buy that land for a housing project, which ended up costing the taxpayers of Ontario \$340 million.

## HEALTH CARE FUNDING

**Mr Dominic Agostino (Hamilton East):** My question is to the Minister of Health. This morning you





made the political decision to fire the board of the Hamilton Health Sciences Corp, and you will bring in your own hand-picked supervisor to run the hospital and to run the administration of that hospital. Minister, this is clearly an attempt to deflect blame. Your short-funding has caused a \$40-million deficit. The board administration had made some wrong decisions, but they also made some difficult decisions because of your funding cuts. They made those decisions in trying to help patients.

Let me read to you from your Waterhouse report: "Community needs clearly outweigh the responsibility for financial accountability when the senior team is making decisions." Minister, that's not a bad thing in health care. Looking after the patients first within your approach of cutting funding is not a bad thing to do. We Liberals believe, on this side of the House, that not one emergency department in Hamilton should close, that not one operating room should close and that not one bed should close.

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Minister, you're now in charge. You have taken over the running of hospitals. Will you stand in your place today and give the people of Hamilton that guarantee?

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** First of all, let me say that our top priority at this point in time is to ensure that we can continue to deliver the quality of patient care that is absolutely necessary to the people in Hamilton. That is our top priority.

Also, you made reference to finance. If you take a look at page 82 of the operational review that was conducted, you will see that the problems at the Hamilton Health Sciences Corp, according to the consultants, had nothing to do with funding or underfunding. In fact, as the member knows, we have actually increased funding for the corporation from \$343 million in 1996-97 to \$369 million in 1999-2000.

At this point in time, we want to address the issue of public confidence in the matter of the hospital. We want to ensure that the deteriorating deficit situation is addressed, and as I say, patient care is our number one priority.

**Mr Agostino:** Minister, if patient care were your number one priority, you would not have cut the over \$40 million you have cut to hospitals in the Hamilton area.

Let me tell you what this is all about. You're now in charge. You now are responsible directly, and you won't give us that guarantee. This was a highly political decision to do this, made in your office over the weekend, Minister, and I'll tell you why. It's because you're looking at that by-election in Wentworth. You're trying to deflect heat and not make any decisions until after the by-election.

Do you know what else it was? It was political payback for Scott Rowand and the board because he had the courage to criticize you and your predecessor over the years for making wrong decisions in health care, and now you're getting even with him. It is political payback, what you're doing here, Minister.

You don't have the guts to stand in your place today and guarantee that you're not going to close one hospital bed, that you're not going to close one operating room or one emergency department. That is a lack of leadership. If you're not going to stand up and do that, then stand up today and tell us which hospital room you're going to close, which emergency department you're going to close, how many beds you're going to cut out of them. You can't have it both ways.

We expect you now to make the right decisions for Hamilton. We expect you to stand up today and tell us that you're not going to close one emergency department anywhere in the city of Hamilton.

**Hon Mrs Witmer:** I am a little surprised and shocked at the member's allegations--

**Mr Agostino:** Who made the decisions?

**Hon Mrs Witmer:** --and, I guess, the lack of concern that he is demonstrating for the citizens in his community.





**Mr Agostino:** Your senior bureaucrats don't agree with you.

**Hon Mrs Witmer:** I think it would be appropriate if the member would read the consultant's report--

**Mr Agostino:** I've read it.

**Hon Mrs Witmer:** --take a look at the information that is contained therein and join with us in order to ensure that we have the appropriate stakeholder input, that we have public consultation in order that we can provide the best possible patient services to people in every part of the Hamilton community. I would encourage you to work with us in order that we can do exactly that.

**The Speaker (Hon Gary Carr):** Order. The member asked a question. It's not fair to then continue shouting at the minister when she is trying to answer. Everyone was very quiet while you asked the question, very forcefully, I might add. Now it's the minister's time to answer. Minister?

**Hon Mrs Witmer:** I'm finished.

#### COMMUNITY SAFETY

**Mr Garfield Dunlop (Simcoe North):** My question is to the Solicitor General. Constituents in my riding have consistently told me that they take the issue of community safety very seriously. At local events, on radio shows, on cable TV shows and door to door, people I've talked to in Simcoe North all believe that we should be able to live in our communities free from the fear of crime.

Minister, during the last election we made commitments to our police services. Could you please tell the House and the people of Simcoe North some of the commitments we made and kept to make our communities safer?

**Hon David H. Tsubouchi (Solicitor General):** I thank the member for Simcoe North for his question, and I'm very pleased to be able to advise the House of some of the many commitments we have kept in the area of public safety.

The first one I'd like to just mention briefly is the Sergeant Rick McDonald Memorial Act. I think this is a very important act that we passed here in this Legislature. By the way, this is the first province to bring in these tough rules against criminals who recklessly flee from the police. We've made arrangements that if someone kills or seriously injures an innocent bystander or the police, they can have up to a life suspension. I believe this has caused the federal government to support the private member's bill brought forward by Dan McTeague, an MP from Pickering, but it's unfortunate that the federal justice minister didn't see this as important enough to bring forward as a government bill. This is very important.

The other one is Christopher's Law, which the House had third reading on just last week--

**The Speaker (Hon Gary Carr):** I'm afraid the minister's time is up.

**Mr Dunlop:** Thank you, Minister, for that answer. Clearly the government believes that when we make a commitment to our police services, we keep it.

Minister, you mentioned our government's commitment to the OPP. As you know, the OPP headquarters and the OPP auxiliary are both located in Orillia in my riding of Simcoe North. Could you please tell the people of Simcoe North the tools our government has provided to the OPP to assist them in fighting crime?

**Hon Mr Tsubouchi:** Once again, I thank the member for Simcoe North.

We have increased the budget for the Ontario Provincial Police by about \$40 million. Since 1995, we've added another 300 OPP officers to the streets of this province.





An important initiative that the OPP is actively pursuing right now is the Ontario Provincial Police child pornography unit. This unit has doubled in size and its budget has tripled, to \$1.3 million. This is very important, I believe, to protect people in this province.

I can quickly mention a small grant which didn't have to do with the OPP. Last Friday in Thunder Bay we provided a grant to the police services to assist them with their community policing project. Chief Toneyguzzi in Thunder Bay has done a wonderful job engaging the community in trying to make it safer, and we're very pleased to participate and assist them in what I think is a very important initiative.

#### GOVERNMENT CONSULTANTS

**Mrs Sandra Papatello (Windsor West):** My question is for the Minister of Community and Social Services. In the fall of 1998, the former minister negotiated an open-ended contract worth \$180 million, minimum, with Andersen Consulting. In this House a year and a half ago we told you that the ministry was paying, on average, 63% higher billing rates than what that contract specified in the request for proposals. In fact, the Provincial Auditor in the 1998 audited report said of that contract, "The ministry had not demonstrated due regard for economy and efficiency in the contract terms."

Minister, the former minister said a year and a half ago that they were to renegotiate those terms. Could you please explain today to this House why, a year and a half later, that contract still has not been renegotiated?

**Hon John R. Baird (Minister of Community and Social Services, minister responsible for francophone affairs):** A number of months ago I committed to this House and to my colleagues that we would seek to renegotiate the contract, because we believed we could do a better job for taxpayers. We believed the old welfare system was out of control, a system with 30-year-old technology, a system where no substantial investment had been made in terms of process or technology. We believed that the time had come. But rather than just talk about it, this government took some concrete steps to turn things around.

We're committed to follow through on the directions that we laid out a number of months ago. We have been doing just that. I don't think it would be in the interests of the taxpayers for me to stand in my place and negotiate on the floor of the Ontario Legislature or in the corridors outside. I hope an announcement will follow in due course.

*Interjections.*

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**Hon Mr Baird:** But I will not accept any lectures or hectoring from the member opposite, who was part of a regime where the welfare system in this province went out of control for years, a system that was so out of control that thousands of people in jail collected--

*Interjections.*

**The Speaker (Hon Gary Carr):** Order. The minister's time is up. Supplementary.

**Mrs Papatello:** This minister has an obligation to answer the question. A year and a half ago, it was guaranteed to this House that that deal was going to be renegotiated; still today it has not. So come in here and talk about concrete steps, renegotiating an open-ended \$180-million contract, where expenses listed as outside the contract are limitless, where \$26,000 for a full-time equivalent by Andersen is submitted in receipts with no proof of expenses even being incurred. Now, will you please stand in this House and explain why you said, in December 1999, "I was very angry to see that audited report. I was very angry indeed." A year and a half later, you still have not renegotiated that contract. Don't come in here and talk about concrete steps; come in here and explain why you have not yet renegotiated that deal.

**Hon Mr Baird:** The government is in the process of following up on the commitments we made in December. I think we can look forward to meeting in short order the set of priorities and directions that





we set out. But I will not stand in my place in the Ontario Legislature and negotiate with the member opposite. She says that I've been doing this for 18 months. I haven't even been in this job for nine months, which is probably the answer.

The honourable member opposite stands in her place and talks about due regard for economy and efficiency. I wish we had seen those types of things when the Liberal government was in power.

*Interjections.*

**The Speaker:** Will the minister take his seat, please. Order. Was the minister finished? New question.

#### **OFFICE OF THE WORKER ADVISER**

**Mr Doug Galt (Northumberland):** My question is directed to the Minister of Labour. Many injured workers rely on the Office of the Worker Adviser for advice and assistance in getting their claims through the Workplace Safety and Insurance Board. For injured workers who are not members of a trade union, the Office of the Worker Adviser provides an invaluable service.

Minister, I have been hearing some rumours that your ministry is planning to discontinue the activities of the Office of the Worker Adviser. Is this true, and if so, where will injured workers go when they need some assistance?

*Interjections.*

**Hon Chris Stockwell (Minister of Labour):** I'd like to thank the member for St Catharines for the question. I've had a number of people actually ask me, with respect to the Office of the Worker Adviser, if there are any thoughts on discontinuing this service. The answer is no. We have decided not to discuss any reduction, any kind of downsizing at this time, other than the 5% across the board which all ministries are looking at. There are improvements resulting from the recommendations. We're also looking at some front-line service increases. In fact, there are two new offices opening, one in my friend opposite's city of Kingston and one more opening in Peterborough. It just proves, which the other side would find somewhat interesting, that, yes, you can economize, you can create efficiencies, you can find 5% savings, but you can also expand the role of front-line workers providing front-line services to the good workers of Ontario, which I know they'll find odd but we in this party find--

**The Speaker (Hon Gary Carr):** Order. I'm afraid the minister's time is up. Supplementary.

**Mr Galt:** Thanks very much, Minister, for your clarification. I can understand your difficulties in responding when you mentioned the member for St Catharines, because I think he really was louder than I was when I was posing my question.

You mentioned that the Office of the Worker Adviser is working to reduce administration and improve services. As part of this process, will resources for the Office of the Worker Adviser be reduced? What will happen to the funding provided to the Ontario Federation of Labour, the provincial building trades council and the injured workers' groups for services they provide to injured workers?

**Hon Mr Stockwell:** Thank you for the question. You named three groups which are valued and treasured friends of ours, I know, and we have gone to great lengths to ensure that these three associations have received the proper funding to provide this kind of training.

*Interjections.*

**Hon Mr Stockwell:** The members opposite suggest arrogance. Nothing could be further from the truth. Arrogance isn't even close to this.

This kind of funding is provided by the government because they provide services for the workers of Ontario. That's the kind of commitment we have. It goes beyond the political spectrum. It goes beyond ideology. They provide valued services for the workers. That's what this government is looking for.





They can continue to count on the dollars and cents from this government, providing they can give front-line service. It's not arrogance; it's common sense, good fiscal management, something I'm sure you're not too wary of.

## GOVERNMENT CONSULTANTS

**Ms Shelley Martel (Nickel Belt):** My question is for the Minister of Community and Social Services. In November 1998, the Provincial Auditor released his audit of your sweetheart deal with Andersen Consulting, and he was anything but complimentary. He noted your ministry had no basis for agreeing to pay Andersen up to \$180 million for the project, especially since Andersen had said the job could be done for between \$50 million and \$70 million. He noted the ministry allowed Andersen to bill rates which were six times higher than rates for comparable ministry staff, that Andersen could increase rates without ministry approval and that Andersen's rates were 63% higher in 1998 than the fees the company said it would charge in the 1995 request for proposals. He noted that the ministry had paid Andersen for work that had nothing to do with the project and that the ministry was paying even though the contract said that no benefits had to be paid until benefits exceeded costs, which has never occurred.

Your former minister said in this House on November 4 that the deal was being renegotiated at that time. Well, it wasn't, and nothing has been done since. How can you possibly justify the contents of this scandalous deal, which the auditor has said is not providing value for money for the taxpayers?

**Hon John R. Baird (Minister of Community and Social Services, minister responsible for francophone affairs):** As I said in the House a number of months ago, I'm not prepared to stand in my place and defend the early mismanagement of this--

*Interjections.*

**Hon Mr Baird:** --as my colleague of the day said word for word the same thing. What we did commit to do was that as we completed the first phase of the project, the design of the new process, we would seek to ensure the process could be successfully completed, successfully completed on time, successfully completed on budget and successfully completed with a substantial cut in the rates. Over the last number of months, we've been working diligently to follow through on those commitments, and I do hope there will be an announcement in short order on that issue. But I will not negotiate on the floor of the Ontario Legislature.

I don't share the pessimism of the member opposite. The member opposite and her party have disagreed with every single welfare reform this government has taken. We tried to say people on welfare shouldn't own cottages. The members opposite disagree. We take measures to combat fraud. The members opposite disagree.

*Interjections.*

**The Speaker (Hon Gary Carr):** Order. Will the minister take his seat, please. I'm afraid his time is up. Supplementary.

**Ms Martel:** It's true that you're not responsible for the scandalous deal that your former minister signed. But you've been the minister nine months now, and you've done absolutely nothing about this deal, not a thing to change any of the serious concerns that the auditor has pointed out.

The public accounts committee was so concerned that we had the auditor review this contract again in 1999. In December 1999, the auditor came back before the committee and said that none of his original serious concerns had been dealt with. There has been no change to the billing rates, no basis to support a maximum payment of \$180 million to Andersen. Andersen is still being paid for work not related to the project and Andersen is still being paid even though benefits have never exceeded the cost of the project.

Worse still, the auditor confirmed that the project is now two and a half years behind schedule and, in the face of that, last fall your ministry signed an agreement to extend the contract by another year. That's what's being done under your watch, Minister.





Because of our ongoing concerns, the public accounts committee moved a motion--moved by the member from Niagara Falls; one of your own--to say that Andersen should not be paid any further money until the contents of this deal had been renegotiated. How much more money have you paid Andersen since then? When will this fiasco stop?

**The Speaker:** Order. The member's time is up. Minister.

**Hon Mr Baird:** The member opposite raises the five recommendations brought forward by the Provincial Auditor. Those five recommendations, coupled with my four bottom lines, have been the basis for us to follow through on the commitment we made a number of months ago. I hope very soon we'll be able to follow through publicly and announce the conclusion of that process. I completely agree with the auditor in those regards.

But for the member opposite to stand in her place and say that this government has done absolutely nothing, I'll tell you one thing, it takes gall.

1430

Working with Andersen Consulting, we've been able to root out fraud, like the individual who is making monthly payments on his gold credit card in excess of his welfare benefits.

*Interjections.*

**The Speaker:** Order. I can't hear the response. The member has asked the question, and now is the time for the minister to give the answer quietly, without people yelling at him.

**Hon Mr Baird:** The member opposite doesn't want to talk about the gold card welfare fraud artist because he was aided and abetted by a government that didn't think anything of welfare fraud, that didn't take any action to get control of welfare fraud, aided and abetted by a government that lets a system go out of--

*Interjections.*

**The Speaker:** Order. The minister's time is up. New question.

#### EDUCATION FUNDING

**Mr Sean G. Conway (Renfrew-Nipissing-Pembroke):** My question is to the Minister of Education and it concerns her recent education funding formula and grants for the fiscal year 2000-01.

Can you explain to the students and ratepayers of the Renfrew county public school board why in your recent grant announcements you did not amend your current funding formula to provide the public school board in Renfrew county with some money under the rural and remote category, monies they have been denied for the past few years and monies, for example, that flow to the neighbouring board in North Bay-Parry Sound to the tune of \$2.4 million annually? Can you explain why you did not include the Renfrew county public school board in your consideration for rural and remote funding in the 2000-01 grants announcement?

**Hon Janet Ecker (Minister of Education):** We did make some enhancements for small boards and boards that were in rural circumstances. The honourable member is correct that the actual funding for the rural boards was not changed this year. We felt there was still more work that needed to be done on some data from the boards before we could make such a change, but we enhanced funding for smaller boards that had fixed administration costs--for example, more money for principals in smaller boards--because we recognize that they have some challenges. We are looking at how we can further improve the funding for boards that have rural communities within their area.

**Mr Conway:** The students, the teachers and the ratepayers of the Renfrew county school board have





been told about challenges and about surveys and about analyses for the past several months now. What they know is simply this: that the public school board in Renfrew county operates in the largest county in the province, clearly one of the most rural in Ontario, and, I repeat, the largest. The public school board in Renfrew is currently getting the lowest per student allocation in all of eastern Ontario and, if we look at the per student funding for the fiscal year 2000-01, the Renfrew county public school board is now getting over \$800 per student less than their neighbours in the public school board of North Bay and Parry Sound.

Minister, how can you continue to justify the evident discrimination whereby the public school board in North Bay and Parry Sound is getting this year over \$2.5 million on the rural and remote funding line and their neighbours in Renfrew county public school board are not getting one red cent?

**Hon Mrs Ecker:** There are additional monies that went to this board, and we are continuing to work with the boards to make sure that we can enhance in areas where it will move forward quality education, as we did in this year's announcement of 190 million net new dollars to education. As I said, some of those funding improvements went to boards that have challenges because of the rural component within their boundaries.

I appreciate the honourable member's point. We were not able to address all of the issues that we know need to be addressed this year. That's why we're continuing to get the information and data back from the boards. I appreciate the point that he is making, but there have been additional monies for these boards and boards with smaller student populations to try and assist in these challenges, and we will continue to move forward on priorities that boards have identified.

#### AGRICULTURE

**Mr Ted Chudleigh (Halton):** My question is for the Minister of Agriculture, Food and Rural Affairs. Since 1995, the Ontario economy has really taken off: Taxes are down, revenues are up, unemployment is down, but, more important, over 701,000 new jobs have been created in Ontario since we've assumed office. However, my constituents in Halton are concerned that Ontario's agricultural community is being left behind. Minister, when you're confronted with this situation, what do you say?

**Hon Ernie Hardeman (Minister of Agriculture, Food and Rural Affairs):** The Mike Harris government has made rural economic growth a priority. With programs like the \$30-million rural job strategy fund and the \$35-million rural youth job strategy fund, we have made investments in rural Ontario that are paying off. Today, I am pleased to inform the House that once again Ontario has led the way in agriculture exports, a key indicator of economic growth. According to Statistics Canada, Ontario's agri-food exports were up 5.8% in 1999 compared to 1998. It is clear to us on this side of the House that Ontario is first on the global menu.

**Mr Chudleigh:** That's indeed good news. People in Halton are concerned that agriculture doesn't get the kind of priority or credit that it should for such a vital role that it plays in the Ontario economy. What proof do you see that makes agriculture such an important industry in this province we live in?

**Hon Mr Hardeman:** Agriculture is the second-largest industry in Ontario, second only to the auto industry. Ontario is known for the safe, high-quality food it produces. The good news is that we are being recognized worldwide for it. Ontario's contribution to national agri-food exports grew from 23.8% in 1998 to 25.7% in 1999. Ontario's food processors and producers are benefiting greatly from the provincial government's drive to cut taxes and reduce red tape. It's another clear sign that Ontario is on the right track when it comes to agriculture and food production.

#### SIGN LANGUAGE INTERPRETERS

**Mr Steve Peters (Elgin-Middlesex-London):** My question is for the Premier.

*The member asked a question using American Sign Language.*

**Mr Peters:** Let me repeat that. Premier, why have you not followed through with the Supreme Court





decision on the Eldridge case? Yesterday was the two-and-a-half-year anniversary of this ruling, which found that the failure to provide sign language in the delivery of health care services for the deaf violates the Charter of Rights and Freedoms. Your government is obliged to ensure that this communication is available. Your government, though, has failed to abide by that ruling. Deaf persons in this province can no more communicate with their doctors and health care providers than could you or others understand what I had originally signed to you. Premier, when are you going to take action and stop putting the lives and the health of deaf persons in this province at risk?

**Hon Michael D. Harris (Premier):** I think the Minister of Health can respond to that.

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** As the member knows, we are moving forward to put in place the recommendations of the case in order to ensure that those people in this province who need that type of support will receive it.

**Mr Peters:** There's an extreme shortage of ASL interpreters in this province. As I travelled Ontario with the Ontarians with Disabilities Act tour, even in the Premier's own riding we could not find an ASL interpreter. We had to bring one in from Kingston and another in from Sudbury. I found that the issue of access to health care services was raised repeatedly by persons within the deaf community. The frustration that persons with disabilities feel as a result of your government's lack of action is overwhelming.

The minister responsible for disabled issues assures me that the minister is working on a plan. It seems that everyone in this government is working on a plan. Give us a break. It has been two and a half years. Minister. When are you going to take action? When are you going to show some leadership and stop the discrimination against deaf persons in the health care system?

**Hon Mrs Witmer:** We certainly recognize the concerns that have been raised and we are moving forward. Yes, we are developing a plan, and we do want to ensure that each individual in this province, no matter where they live, will have equal access to the health services that they deserve.

1440

## TOURISM

**Mr Raminder Gill (Bramalea-Gore-Malton-Springdale):** My question is to the Minister of Tourism. People in my riding and all over Ontario are telling us that this government has done a lot to support job creation and to keep the unemployment rate down. In fact, we have created over 701,000 new jobs. Can you tell us today how your ministry is contributing to Ontario's overall job growth?

**Hon Cameron Jackson (Minister of Tourism):** I'd like to thank my colleague for the question and I'd like to advise all members of the House that tourism is one of the fastest-growing industries in the world. It has become extremely competitive, and Ontario is ideally positioned with our government's job creation agenda to ensure that we get more than our fair share of increased tax revenues and new jobs.

Also, it is one of the largest contributors, with its invisible exports worth over \$7 billion to the Ontario economy. That's how much money we bring into the province from outside our province as an export.

Half a million jobs have been created in the tourism industry in this province and it's about 8% of our total employment. As you can see, tourism expansion and growth is a vital and important part of our economy.

**Mr Gill:** With school almost over for another year and the summer season fast approaching, can you tell us what opportunities there are for youth and students in this area of tourism?

**Hon Mr Jackson:** First of all, I'd like to say that summer months are a very important part of tourism expansion and growth in our province. One out of two jobs, half of all the jobs created for students in this province, are involved in the tourism sector, and there's even more growth anticipated. Because of the Mike Harris job creation agenda, we know that in 1999 we had 60,000 new jobs last summer and





30,000 of those went directly into tourism.

As you know, our province operates six world-class attractions that are vital to our economy and to our heritage and to the local economies where they're located. Just the Ministry of Tourism, through these six attractions, will employ over 1,800 students this summer. My colleague the Minister of Training, Colleges and Universities also has taken a leadership role in expanding employment for students through her summer Experience program--programs that are working and expanding access to students for summer jobs.

## HEALTH CARE FUNDING

**Mr David Christopherson (Hamilton West):** My question is to the Minister of Health. Last Wednesday I called on you to use your authority under the legislation to step in and announce and assure and guarantee that the four acute care hospitals in Hamilton, specifically the Henderson, with its emergency ward and the cancer centre attached, would remain open. Today you've announced that indeed you're stepping in, but I haven't yet heard you say that you're guaranteeing the retention of the Henderson emergency ward, which of course is the sole reason why we needed you to step in with this authority.

Minister, I urge you and call on you again today to stand in your place and announce that the decision you've made today means that the Henderson hospital, its emergency ward, the cancer centre attached to it and the three other acute care hospitals in Hamilton will remain open.

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** Yes, the member did call upon me last week in order to do the right thing. In fact, you said, "You have the opportunity to step in and do the right thing," on April 5.

We have today the operational review which was received from the consultants and which clearly states that:

"HHSC will need a senior management team with extensive experience, agility, staying power and a bias to action. It is the view of the consultants that the current management team, as presently constituted, will have difficulty delivering the required change program."

I have moved forward in response to this report to announce that in 14 days we will be appointing a supervisor, because I would concur with the member: We need to ensure that as we move forward to build a strong health system in Hamilton--

**The Speaker (Hon Gary Carr):** I'm afraid the minister's time is up.

**Mr Christopherson:** Minister, in answer to my colleague from Hamilton East's question, when he raised what this means without the guarantee, you said that you were surprised and shocked at the member's allegations. Let me say to you also that in the absence of a guarantee that the Henderson emergency and the cancer care centre will remain open at their existing sites, we have no conclusion to reach other than this is two things: One, it's retaliation against a board and a management that called you on the issue of funding cuts, and secondly, you just want to buy some time so you can get through the Wentworth-Burlington by-election.

Minister, if you want these allegations to stop, then stand in your place and say that the Henderson emergency ward and the cancer care centre are going to remain open. That'll end it. You can do that right now. Stand up and give our community the guarantee that that's what your action today is all about. Otherwise, you're just playing politics.

**Hon Mrs Witmer:** I realize that your second question hadn't anticipated my response, but I did quote to you from the Price Waterhouse study, which clearly indicates there is a need to take action, there is a need to develop a very strong recovery plan.

I had the opportunity last week to meet with some of the residents in the Henderson hospital community





and also with MPP Dr Bountrogianni, who brought those individuals. I listened. I was concerned that there had not been an opportunity for any local consultation or stakeholder input. We want to make sure everything is done to ensure that patients will get the care and services that are needed no matter where they live in the Hamilton community. The plan to bring in a supervisor will put us on a path where we can respond to the recommendations and we can provide for public consultation and input.

## FUNDRAISING

**Mr Michael Bryant (St Paul's):** My question is for the Premier. Charities across the province are being devastated by this silly squeegee bill. It's had no effect in the city of Toronto, where in fact there is a problem. In small urban and rural communities, Shinerama, the Muscular Dystrophy Association and all other charities that raise money on street corners are being captured by clause 3(2)(f), which says very simply that you cannot solicit a person while on a roadway while they're stopped in a parked vehicle. Municipal councils have found that they will not give permits to these charities to go forward.

Premier, forget about the legalese, forget about the politics and forget about the letter written by the Attorney General to paper it over. Will you please stand up and give your commitment that you're going to give charities the exemption they deserve so that they can raise the \$1 million that they're going to lose as a result of this silly bill?

**Hon Michael D. Harris (Premier):** I don't think that the majority of Ontarians think this is a silly bill. This is a bill designed to say that our streets can be safe for our drivers and pedestrians, and that people who are either on the street or walking along the side have the right to do so without being harassed. That's why it's called the Safe Streets Act in the first place.

Let me say very unequivocally and clearly: This bill is not a detriment in any way to any charity, any group of Scouts or Brownies, any group that wishes to have car washes and to have signs on sidewalks. That's been made very clear by the Attorney General. The police forces know that. For you to suggest that the application of this bill will in any way impact on those legitimate charities is simply not true and is fearmongering.

**Mr Bryant:** I listened to the Premier's answer very closely.

Look, there's nothing in the bill--and we can argue about what the bill says--but the fact is, municipal councils are not permitting charities to do this, and they're going to lose \$1 million a year. That's not fearmongering; that's a fact.

I know this may be complicated for those who are not lawyers, but in all reality, it's not at all.

*Interjections.*

**The Speaker (Hon Gary Carr):** Would the member take his seat. Order. I need to be able to hear the question. Member, please continue.

**Mr Bryant:** The government misunderstands.

Look, it's as simple as this: Premier, are you going to stand up and continue to force this serious Toronto issue down the throats of rural and small urban communities, or are you going to let this bungled legislation cost charities \$1 million a year, year after year, have no effect in the city of Toronto and in fact ruin these charities' future going into the next century? What are you going to do about the problems?

1450

**Hon Mr Harris:** I've never heard such a silly question in my 19 years in the Legislature--never. Certainly charities themselves have indicated they could proceed with their activities and that they intend to. Soliciting on a sidewalk, shoulder, boulevard, median or other place that is not a roadway is clearly not covered by the legislation. The police forces know that; municipalities know that.





Let me give you an example. The president of the London chapter, Canadian Cystic Fibrosis Foundation, says this: "It's the intention of our foundation and Shinerama committees across Ontario's colleges and universities to continue this successful campaign on the street corners, on our sidewalks. In addition to raising awareness and funds for cystic fibrosis research, it is our primary goal that all students conduct themselves in a safe manner." Common sense says that makes sense.

## PETITIONS

### GASOLINE PRICES

**Mr Rick Bartolucci (Sudbury):** This petition is to the Legislative Assembly of Ontario:

"Whereas we, the consumers, believe fuel prices are too high throughout Ontario; and

"Whereas we, the consumers, support the Ontario Liberal caucus's attempt to have the Mike Harris government pass legislation that addresses this concern; and

"Whereas we, the consumers, want the Mike Harris government to act so that the consumers can get a break at the pumps rather than going broke at them; and

"Whereas we, the consumers, are fuming at being hosed at the pumps and want Mike Harris to gauge our anger; and

"Furthermore, we, the consumers, want Mike Harris to know we want to be able to go to the pumps and fill our gas tanks without emptying our pockets;

"Therefore we, the undersigned, petition the Legislative Assembly of Ontario to pass Bill 16, the Gasoline Pricing Act, introduced by St Catharines MPP Jim Bradley; Bill 18, the Gas Price Watchdog Act, introduced by Eglinton-Lawrence MPP Mike Colle; and finally, Bill 52, the Petroleum Products Price Freeze Act, introduced by Sudbury MPP Rick Bartolucci."

Of course, I agree with this petition and affix my signature to it.

### KARLA HOMOLKA

**Ms Marilyn Mushinski (Scarborough Centre):** I have a petition addressed to the Legislative Assembly of Ontario that reads as follows:

"Whereas Karla Homolka and Paul Bernardo were responsible for terrorizing entire communities in southern Ontario; and

"Whereas the Ontario government of the day made a deal with the devil with Karla Homolka resulting in a sentence that does not truly make her pay for her crimes; and

"Whereas our communities have not yet fully recovered from the trauma and sadness caused by Karla Homolka; and

"Whereas Karla Homolka believes that she should be entitled to passes to leave prison with an escort; and

"Whereas the people of Ontario believe that criminals should be forced to serve sentences that reflect the seriousness of their crimes;

"Therefore we, the undersigned, respectfully petition the Legislative Assembly of Ontario as follows:

"That the government of Ontario will:





"Do everything within its power to ensure that Karla Homolka serves her full sentence;

"Continue to reform parole and make it more difficult for serious offenders to return to our streets;

"Fight the federal government's plan to release up to 1,600 more convicted criminals on to Ontario streets;

"Ensure that the Ontario government's sex offender registry is functioning as quickly as possible."

Mr Speaker, I am pleased to affix my signature to this petition.

#### **AGRICULTURAL DIPLOMA COURSES**

**Mr Pat Hoy (Chatham-Kent Essex):** "Whereas recent announcements by the Ontario Ministry of Agriculture, Food and Rural Affairs (OMAFRA) reduced their educational budget grant to the University of Guelph by \$3.5 million; and

"Whereas this funding reduction will adversely affect the agricultural diploma courses which the University of Guelph oversees at Ridgetown, Kemptville, Alfred and agricultural diploma courses at the University of Guelph; and

"Whereas it is vital for the agricultural industry to have a practical, trained talent pool for business and leadership; and

"Whereas diploma courses at agricultural colleges account for only a small portion of OMAFRA's budget;

"Whereas Ontario's agri-food industry contributes \$25 billion annually to the provincial economy and generates \$6.2 billion in agri-food exports and employs more than 640,000 people; and

"Whereas, if agriculture is to compete on its own and be competitive in world markets, it must have and maintain a source of well-trained personnel; and

"Whereas OMAFRA has recently announced several new programs which will cost millions of dollars and not benefit agriculture directly, in the same way that diploma courses would;

"Therefore, be it resolved that we the undersigned petition the Parliament of Ontario as follows:

"That OMAFRA provide the financial support to maintain the colleges and ensure the present agriculture college diploma courses are continued and that funding for research facilities of the colleges also be maintained. This petition began as a resolution of the township of West Perth and it has been circulated to ROMA/Good Roads, the Minister of Agriculture, Food and Rural Affairs, the Premier and the local MPP."

I affix my name to it.

#### **HEALTH CARE FUNDING**

**Mr David Christopherson (Hamilton West):** I have a petition to the Legislative Assembly of Ontario:

"Whereas the Harris government has cut \$40 million from the budget of the Hamilton Health Sciences Corp, which has resulted in a health care crisis in Hamilton-Wentworth and left the HHSC with a \$40-million deficit; and

"Whereas the HHSC is now planning to downsize and cut back services at the Henderson hospital by converting the hospital to a daycare hospital with urgent care, rather than an emergency department; and

"Whereas this will have a serious impact on emergency services for the 200,000 residents of Hamilton





Mountain, upper Stoney Creek, Glanbrook, Ancaster and other communities above the escarpment; and

"Whereas the mountain population is a rapidly growing community and deserves and needs a full-service hospital; and

"Whereas an ambulatory care centre is not an acceptable replacement for a 24-hour emergency ward; and

"Whereas it does not make sense to spend \$100 million for a new cancer centre rather than half that amount to expand existing facilities at the Henderson hospital; and

"Whereas Mike Harris said on February 10 the Henderson hospital would remain open for acute and cancer care;

"Therefore, we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That the Legislative Assembly of Ontario direct the Harris government to restore the funding cuts to the Hamilton Health Sciences Corp and develop long-term solutions for the maintenance of appropriate acute care services at the Henderson hospital to serve the needs of the growing population of Hamilton-Wentworth and central south Ontario."

I proudly my name to those of these petitioners.

#### PROTECTION OF MINORS

**Mr John O'Toole (Durham):** I have a petition to present on behalf of my constituents, Maria Speziale and Denis Radcliffe and Father Randy Foster, to name but three.

"To the Legislative Assembly of Ontario:

"Whereas children are exposed to sexually explicit material in variety stores and video rental outlets;

"Whereas bylaws vary from city to city and have failed to protect minor children from unwanted exposures to sexually explicit materials;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"To enact legislation which will:

"Create uniform standards in Ontario, to prevent minors from being exposed to sexually explicit material in retail establishments;

"Make it illegal to sell, rent or loan sexually explicit material to minors."

I'm pleased to sign and endorse this petition on behalf of my constituents.

#### HEALTH CARE FUNDING

**Mr Ernie Parsons (Prince Edward-Hastings):** I have a petition to the Legislative Assembly of Ontario:

"Whereas Canada's health care system is one of our greatest achievements as a country;

"Whereas health care in Ontario has deteriorated, with medical services being reduced and hospital budgets cut to the bone, resulting in lengthy delays in treatment, with sometimes fatal results;

"Whereas major changes in health care legislation by the Harris government have been made with no prior public consultation;





"Whereas residents of Prince Edward-Hastings are demanding that their voices be heard and their concerns addressed to ensure that future health care legislation meets their needs;

"We, the undersigned, petition the Legislative Assembly of Ontario to call on the Harris government to protect our valued health care system and to hold public hearings on Bills 23 and 173."

Being in agreement, I am pleased to add my signature to this petition.

#### OCCUPATIONAL HEALTH AND SAFETY

**Mr David Christopherson (Hamilton West):** I continue to receive petitions from the CAW health and safety department, signed by thousands of their members, regarding cancer in the workplace. The petition reads as follows:

"To the Legislative Assembly of Ontario:

"Whereas this year 130,000 Canadians will contract cancer and there are at minimum 17 funerals every day for Canadian workers who died from cancer caused by workplace exposure to cancer-causing substances known as carcinogens; and

"Whereas the World Health Organization estimates that 80% of all cancers have environmental causes and the International Labour Organization estimates that one million workers globally have cancer because of exposure at work to carcinogens; and

"Whereas most cancers can be beaten if government had the political will to make industry replace toxic substances with non-toxic substances at work; and

"Whereas very few health organizations study the link between occupations and cancer, even though more study of this link is an important step to defeating this disastrous disease;

"Therefore we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That it become a legal requirement that occupational history be recorded on a standard form when a patient presents at a physician for diagnosis or treatment of cancer and that the diagnosis and occupational history be forwarded to a central cancer registry for analysis as to the link between cancer and occupation."

On behalf of my NDP colleagues, I add my name to this petition.

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#### PRIX D'ESSENCE / GASOLINE PRICES

**M. Jean-Marc Lalonde (Glengarry-Prescott-Russell) :** Mr Speaker, I have a petition with over 200 names.

« À l'Assemblée législative de l'Ontario :

« Attendu que le prix des produits pétroliers a augmenté significativement dans les dernières six mois :

"Whereas the Mike Harris government has done nothing to protect consumers and is afraid to take on big oil companies;

« Attendu que le marché de vente en gros pour les produits pétroliers est contrôlé par un oligopole d'huile qui gère 85 % du marché de vente en gros ;

"Whereas the long-term increase in the price is mostly due to taxes that have doubled in the past decade;





« Attendu que le ministre fédéral des Finances, Paul Martin, est prêt à discuter avec les provinces afin de baisser les taxes sur l'essence ;

"We, the undersigned, petition the Legislature of Ontario as follows: that Mike Harris take initiative and lower provincial taxes on petroleum products.

« Nous, soussignés, adressons la demande suivante à l'Assemblée législative : que Mike Harris prenne initiative et baisse les taxes provinciales sur le prix des produits pétroliers. »

J'y ajoute ma signature.

**The Deputy Speaker (Mr Bert Johnson):** My apologies to the member for Durham. I went right past and didn't see you, and I give you the floor now.

#### ABORTION

**Mr John O'Toole (Durham):** Mr Speaker, your apology is gratefully accepted and not necessary.

I have a petition on behalf of a number of my constituents: Pat Wilson, Maria Barrese and Ron Sucee, to name but three.

"To the Parliament of Ontario:

"Whereas we have recently learned that our tax money is being used to pay the rent on the Morgentaler abortuary; and

"Whereas by the end of his lease this amount will be \$5 million; and

"Whereas we strongly object to this use of our tax dollars;

"We, the undersigned, petition the Parliament of Ontario to immediately cease these payments."

I'm pleased to sign my name to this petition.

#### AFFORDABLE HOUSING

**Mr David Christopherson (Hamilton West):** This petition reads as follows:

"To the Legislative Assembly of Ontario:

"Whereas the Harris government's plan to force the sale of subsidized housing in Hamilton-Wentworth will create a crisis for 700 local families; and

"Whereas in addition to these 700 families there are 3,700 other families on waiting lists who will be left without affordable accommodation; and

"Whereas, where are these families supposed to go when we know there is not enough decent, affordable housing to meet their needs? and

"Whereas the Harris government's housing sell-off is mean-spirited and targets the poorest families who are now threatened with possible eviction;

"Therefore we, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That the Legislative Assembly of Ontario direct the Harris government to save these affordable housing units for low-income families, and support new affordable housing to help the 3,700 families on waiting lists in our community."





I proudly add my name to this petition.

#### HIGHWAY SAFETY

**Mr Bruce Crozier (Essex):** I have a petition from the CAA and other residents of Ontario.

"To the Legislative Assembly of Ontario:

"Whereas 13 people died during the first seven months of 1999 on Highway 401 between London and Windsor; and

"Whereas traffic levels on all sections of Highway 401 continue to increase; and

"Whereas Canada's number one trade and travel route was designed in the 1950s for fewer vehicles and lighter trucks; and

"Whereas road funding is almost completely paid through vehicle permit and driver licensing fees; and

"Whereas Ontario road users pay 28 cents per litre of tax on gasoline, adding up to over \$2.7 billion in provincial gas taxes, and over \$2.3 billion in federal gas taxes;

"We, the undersigned members of the Canadian Automobile Association and other residents of Ontario, respectfully request the Legislative Assembly of Ontario to immediately upgrade Highway 401 to at least a six-lane highway with full paved shoulders and rumble strips; and

"We respectfully request that the Legislative Assembly of Ontario place firm pressure on the federal government to invest its gasoline tax revenue in road safety improvements in Ontario."

I add my signature in support of that.

#### FAMILY RESPONSIBILITY OFFICE

**Mr Michael A. Brown (Algoma-Manitoulin):** I have a petition to the Legislative Assembly of Ontario:

"Whereas the proposal to introduce a service user fee upon families involved with the Family Responsibility Office will inflict unnecessary economic hardship; and

"Whereas the Ontario government acknowledges the service user fee to be counterproductive;

"Therefore we, the undersigned citizens of Ontario, petition the Ontario Legislature to acknowledge the unfairness of the service user fee and commit to impose aggressive actions that are seldom used against deadbeat parents."

This is signed by literally hundreds of constituents from the Espanola, Nairn Centre and Massey area of my constituency.



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# Ontario Hansard

10 Apr 2000

1st session, 37th Parliament | 1<sup>re</sup> session, 37<sup>e</sup> législature

Mon 10 Apr 2000 / Lun 10 avr 2000

## ORDERS OF THE DAY

### HEALTH CARE FUNDING

Resuming the debate adjourned on April 6, 2000, on the amendment to the amendment to the motion by Mr Harris relating to health care funding.

**Mr John O'Toole (Durham):** It's my pleasure to rise and address this very important issue facing Ontario but indeed all Canadians, I might say. I could preface this by saying it's really an issue of fair share. I think if I look at the current information that is before us in the press, in the media, we've certainly got the attention of the people of Ontario.

Here on the public record I want to thank our Premier, Mike Harris, for taking the lead on this very important initiative on behalf of all Canadians. I believe the federal government for too long has been getting off the hook, avoiding its ultimate responsibility of providing its full support; that is, 50% on every health care dollar was initially supposed to come from the federal government. To bring everyone up to date, and I'm sure we'll hear this repeated many times during the debate--by the way, Mr Speaker, I would say that the other speaker sharing my time will be Mr Hastings from Etobicoke North.

The debate really does come down, unfortunately, to providing the right level of service, which of course means money, for the people of Ontario. Not just the people of Ontario--I think we should get on the record right from the beginning that this is about all Canadians. Ontario has always been a leader, not just in health care but of course in many areas.

We were elected in 1995. At that time our health care funding was \$17.4 billion. The election of 1995 was clearly an election where the issue of health care was front and centre. I know the current opposition party at the time committed to spend something under \$17 billion. In fact, our commitment was to maintain health care funding at \$17.4 billion. What has happened, because of demands and of course the reductions in transfer payments from the federal government, which is really the nub of the story here, is that we've had to increase the spending.

For the record--it will be repeated--I can tell you that we increased funding to \$20.8 billion in 1999-2000. So you can see it has gone from \$17.4 billion to \$20.8 billion, a significant increase. In contrast, I might add, in 1999-2000 Ontario will receive \$1.7 billion less from Ottawa under the Canadian health and social transfer payments than the province received since the beginning in 1994-95.

I'm just looking at a Toronto Star article dated April 8. The title of that article--not normally known for complimenting this government, the Toronto Star, but nonetheless it does report what is news. The top headline here is, "11c or 34c: What is Ottawa's Health Payout?" The article goes on to say that the transfer to Ontario is spent on other areas. It goes on to say that it's spent on allocation for post-secondary or higher education and social programs, as it should be. You can see that the province of Ontario has tried to invest enormous amounts in post-secondary education to have the spaces available for students of the future. There's a very high demand. I think we have the highest percentage of





post-secondary participation of all the provinces, so that of course takes additional dollars. I would argue that if we looked into the numbers, we'd find even there reduced dollars from the federal government. I suspect that if you looked at their recent millennium scholarship fund, there's a case in point, where many students who felt they were getting additional funding indeed at the end of the day found they weren't.

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Leading the battle in health care reform, what I have argued is that there has to be more clarity and more commitment to the funding. That's first and foremost. Going back to the original agreement on Canada's health care system, I think it was founded on a shared principle. Under the Canada Health Act, I would think there's the responsibility of the federal government which outlines those services that are required to be provided by the provinces. I certainly endorse that. I don't have a problem at all with the federal government's lead role there for all Canadians, whether they're in Prince Edward Island or in BC. Setting standards and maintaining at least minimum standards is absolutely critical, because we've defined ourselves by our health care system.

Again, it's not just money. It's providing the right services, whether it's in remote areas of Ontario or remote areas of Canada, and making sure that we hav>

### **Transfer interrupted!**

ution and access to a higher order of services, whether it's MRI--I might just say that Ontario has excelled in the expansion of access to magnetic resonance imaging, which is the latest technology in diagnostic medicine. I think Ontario has more MRI machines per population than any other province in Canada. Having those kinds of equipment and technology available to people is absolutely critical.

You should know that I have to compliment the previous government, because when we were elected it had already begun restructuring health care. Under Frances Lankin, who I believe was the health minister at the time, they started the restructuring of health care. In our area at that time I was a regional councillor, and the district health councils reported the acute care study. In the acute care study they agreed that we had to restructure the delivery of health care, ie, hospitals. Some later speakers may get up and criticize the government for the way it approached that, but nonetheless we were getting on with the job.

In that restructuring plan, at about the same time, we announced in excess of \$1 billion for 20,000 additional long-term-care beds. Those long-term-care beds were part of the new delivery model which was taking long-term and chronic care out of the hospital setting and into the community setting. Adjacent and complementary to that, you would know that we also took new initiatives to set up 43 community care access centres, CCACs. In Durham it's called Durham Access to Care. That was expanding the level and delivery of health care in the community. These are home supports where people will not any longer recuperate in a hospital setting, where it's very expensive and people are perhaps exposed to high virus risks etc. People have told us repeatedly that they're more comfortable and recover quicker in their own homes. So those two fundamental changes of providing an increased number of long-term and community beds as well as providing community care, which is home supports, were absolutely part of the whole restructuring of delivery of health care.

I believe the work of Dr Wendy Graham with respect to primary care reform was also a very important initiative taken on by the government. As we know--we've heard that question in the House--there are seven or eight pilot activities across the province to provide support.

Another thing is the expansion into using the nurse practitioner. I can tell you, I've been very supportive of individual nurse practitioners in my riding and indeed practices in my riding who wanted to use the services of the nurse practitioner.

I believe the issue here today is that there are reforms required in health care. Ontario is moving forward, as it should. I challenge the federal government to be there as an equal partner, whether it's in home care,





hospital budgets or physician services budgets, or in the expanding and ever-increasing role of prescription medicine, which in the future will outstrip any ability to pay, I believe.

With that, I would like to share my time with the member for Etobicoke North, Mr Hastings.

**Mr John Hastings (Etobicoke North):** I'd like to continue this story of reform that the Ontario government initiated some five years ago, to contrast actual reforms that have produced effective results with the federal government's approach, which is to really just talk about reforms but not deliver.

If you take, for example, the whole area of pharmacare or the example of home care, we have heard from the current Minister of Health in Ottawa, Minister Rock, that he would like to do something about this: bring in home care, bring in pharmacare. That was some two and a half years ago, when he was appointed minister, but where are the practical results today? Hardly anything. If you look at his current position, when he presided over the meeting of the health ministers of Canada in Markham recently, again he reiterated that we needed to work together, that we needed new reforms. But did we have any specifics? None whatsoever. You would think that under his leadership we would have had some specific proposals brought forth, particularly in home care, which is one of the areas he likes to talk about so much. He has a new Canadian Institute for Health Information; he has the Canada Foundation for Innovation. Have we seen any monies put into these areas to help him along? Not at all.

Contrast that with what the government of Ontario has done under our current Premier. We have introduced some 43 community care access centres and brought about some fairly effective home care for those folks who can't stay in hospital as long as they would like to because of new drugs, new therapies, new technologies. I can recall that back in the late 1980s, early 1990s in Etobicoke North, there was hardly anything called home care--people were practically on their own--and when money was allocated for this particular activity, this very vital service, most of the money went to the old city of Toronto. In fact, we are still looking for some \$800,000 that was allocated to Etobicoke back in 1994-95; we haven't seen it yet.

It's the same with pharmacare. We have one of the most effective drug plans--Trillium--that you can find across Canada. The modest user fee is approximately \$100, compared with some other provinces, especially Saskatchewan, which is going to be nearly \$1,700. It's quite a contrast when you compare that with Saskatchewan, a province which was the original home of medicare.

I think the Premier is right in initiating this discussion and forcing the federal government to come back to the table with the money of which it has deprived Ontario since 1995, some \$4.2 billion. It's not just a matter of reform, it's a matter of money, and if you don't have the money, which is rightfully ours because it came from the taxpayers of this province--and that's what the federal government has to do first: pony up the \$4.2 billion, instead of pretending to talk about health reforms.

The current federal health minister likes to talk about Ottawa being an equal player in this field; it is hardly a 10-and-a-half-cent player, let alone a 50% player, which was the original design of the whole medicare arrangement. We don't have that presence today of the federal government, yet it wants to insist under the Canada Health Act that it will be the standard player in designing the real innovations, the real reforms that the provinces have initiated, whether it be home care in Manitoba or many of the pilot projects initiated in Ontario: primary care reform, new investments in dialysis equipment, the community care access that I was talking about, and particularly the hospital realignment.

1520

In our own community we have managed, through the effective leadership of president Leo Stevens, to bring about three hospitals under the William Osler Health Centre: originally Peel Memorial, Georgetown public hospital and the Etobicoke General Hospital. These three organizations had large bureaucracies; now they have one slimmed-down administrative arrangement. Where did that money in savings go? Right back into front-line patient services.

That's something we're constantly criticized for by the parties opposite, but when it comes to the real reforms, we don't see them joining with us to demand that the federal government restore the \$4.2 billion





that Ontario and its taxpayers rightfully deserve so that we can put it into health care spending that will produce effective and positive results in a whole set of areas.

I must point out that we have heard from members opposite, particularly members of the opposition party, perpetuating the myth that they brought about some fantastic health care reforms in the 1980s. Let's revisit for a moment what the Peterson government did manage to establish.

Back in 1985-86 we had a massive doctor walkout thanks to the so-called innovations of the health minister of that day. They were out for a good length of time and that brought considerable anxiety to people who were looking for medical services that were of quality, that were effective and brought results in restoring their health. Those doctors went out because of very serious concerns, but the health minister of that day trumpeted it as an innovation. I don't know how you can end up with an innovation when you have doctors walking out, who are key players in the delivery of health services.

Another innovation they brought along later, about 1989, was the job-killing employer health tax levy. That certainly brought about a tremendous reform in health care under their administration.

If they had followed through on some of the things they were talking about, we would be a long way down the road to the reform that we had to initiate in 1995.

So for the record, let us be very clear that when it comes to the implementation of reforms instead of imposing new restrictions, don't look to Ottawa in terms of pioneering innovation. If you look to Ottawa, all you'll get, forever and a day, are the placebos out of the Canada Health Act, which, incidentally, was not motivated and introduced for bringing in quality health care or making quality health care affordable, universal or portable. If you go back and look at the debates of those days, it really had to do with cost containment. Back in 1977 the cost of health care started to rise enormously. That's when the feds got anxious, got scared, and they started to jump ship on their full-scale commitment to health care, to medicare in this province.

Not only is it the \$4.2 billion they need to pony up before they become full players again, but they have a long way to go in becoming 50-50 partners in health care in this country. It seems to me their leadership is lacking, their innovation is nearly non-existent and their proposals for reform in terms of the changing needs and changing demographics of people, not only in Ontario but across this country, are severely wanting.

Let me conclude by saying that we need a federal government that gets back as a full player in health care, because right now, all they are doing is talking about reforms but they never really get down to the specifics. They need to bring back the \$4.2 billion which they took out of this province, instead of reducing their own internal administrative expenses back in the mid-1990s, when Mr Martin had his war on the deficit. They need to refocus a lot of the money they're putting into things like the questionable millennium expenditures over the last six or eight months. They need to re-examine all the billions they're pouring into the black hole known as Human Resources Development Canada, the Export Development Corp owing nearly \$22 billion, folks, and other like-minded questionable expenditures; get back to the core functions of government, like we have for the last five years: quality health care and effective education, instead of handing out cheques before people can pony up to the trough. If they don't do that, they really are not going to be an effective player at the table.

Finally, you can't trust either the provincial Grits or the federal Grits when it comes to the administration in the future--

**The Acting Speaker (Mr Ted Arnott):** Further debate?

**Mr John Gerretsen (Kingston and the Islands):** Let me just pick up on the last point that was made by the member. If there's one thing that the people of Ontario are absolutely united behind, it's the notion that you cannot trust the Tories with health care. It's a known fact. It's the Tories throughout this country who are talking about privatization of our system, the Americanization of our system. It's out there, and for him to even suggest that the Liberal Party, which throughout the last 40 years has been the chief advocate of a universal health care system for this country--that simply would not be telling it like it is.





This member knows that.

You know, it's kind of interesting: I look at the resolution that the member for Waterloo-Wellington has brought forward. That's going to be debated this Thursday. Let's just read what he says about this whole situation. He wants this passed this Thursday, and I agree with him. He states:

"That, in the opinion of this House, the government of Canada should take immediate action to fully restore the Canada health and social transfer to 1994-95 levels, and work to establish a fair funding approach which ensures that these cash transfers increase to keep pace with future cost pressures faced by provincial governments in their delivery of health services."

I totally agree with that.

Now let's look at the tone of the resolution that the Premier has brought forward. He says:

"That the Legislative Assembly of the province of Ontario,

"Condemns the government of Canada for cutting ... the base payments under the federal program;

"Urges the government of Canada to repudiate the statement attributed to" some spokesman. The resolution further "reminds the federal Minister of Health ... that the sincerity of his commitment to medicare" is in question, etc.

The people of Ontario and the people of Canada quite frankly aren't interested in the blame politics that are clearly evident in the resolution as put forward. They want solutions to this problem. There is no question in my mind that over the last four to five years the central issue that people talk about more than any other is the declining quality of their health care system here in Ontario. You can blame the province, you can blame the feds, you can just keep on blaming everybody if you want, but the bottom line is this: The quality of our health care system is declining, and the people of Ontario quite frankly aren't interested in who to blame on the issue. They want to see results and they want to see action.

It's very interesting, you know, that the same Michael Harris who has proposed this resolution--let's just hear what he said on October 21, 1996, about the federal transfer payments. I'm quoting directly from Hansard:

"I could do as you used to do in government: blame it on the federal government and their cutbacks and the transfers and the layoffs, but I won't do that, because we've actually been supportive of the federal government trying to get its house in order and reducing the number of people it employs as well."

That was the Premier back in October 1996. He didn't want to throw blame on the federal government. He wanted them to get their house in order. We all remember that when the Liberals took over in Ottawa in 1993 the annual deficit that we were incurring in this country was at the rate of \$42 billion per year. There was an overall recognition by everyone that something had to be done, in the same way that something had to be done with respect to the \$11 billion that we had as a provincial deficit left by the New Democratic government back in 1994-95. No question about that.

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Now, what did Harris say on June 19, 1996, exactly the same year? He went even one step further. He said: "We support the federal government balancing its books, getting its affairs in order. We even support them reducing the transfers to the provinces...." That's what he said then. I assume he meant it. What's he saying now?

Let me make it absolutely clear that I, as does the member from Waterloo-Wellington, agree that both levels of government have to come to the table. Our publicly funded and accessible health care system is truly at risk and at stake. I'm sure that each and every one of us has heard horror stories in our own constituency office of people who are on waiting lists for six months, nine months, over a year, before they can see a doctor or get the necessary surgical procedure done in the hospital or get hospital care.





You can just go on and on. We've heard these stories and quite often we are powerless to do anything about it. We've even heard of situations where, as the Provincial Auditor, an independent agency of this Legislative Assembly, clearly pointed out in his audit report last November, only 32%--that's less than one in three--of those individuals who have been diagnosed with cancer are getting radiation treatment within the prescribed period of time, which is usually four weeks. That is a stunning indictment on our system.

I could go on and on and mention all sorts of horrible things that are happening out there. How about the critical bypass situation here in Toronto and elsewhere as well, where basically ambulances have to scurry from one hospital to another because emergency rooms are full, and in the meantime precious time is being lost and the person who needs the immediate medical attention isn't getting it.

We've all heard those kinds of stories. Now, what do we do about it? That's the real question. Spreading blame from one level of government to another level of government, particularly by a government that at one time was fully supportive of the federal government doing what it had to do as far as the cuts in transfer payments are concerned, isn't getting us anywhere.

Even when the transfer payments were cut by the federal government--and we all know it happened, back in 1995, 1996 and 1997--this government had a clear-cut choice. It could do away with its tax cuts and say: "Look, the financial scene has changed. We are not getting as much money from the federal government as we used to in the health care portfolio. The rules of the game have changed, but we believe in a truly quality, publicly funded health care system, and so we're not going to give tax cuts. We are going to put that money that we're not getting from the federal government into the much-needed health care system."

Why didn't they do that if they felt that strongly about it? If they felt that strongly about it and if that money was really required for our health care system, which it was at the time, why didn't they forget about the tax cut and put it into the health care system?

**Mr Frank Mazzilli (London-Fanshawe):** The Liberals have forgotten about the tax cuts.

**Mr Gerretsen:** The member says Liberals forgot about tax cuts. As far as I'm concerned, sir, and as far as my caucus is concerned, the most important thing is to make sure that there's adequate funding for our publicly supported health care and education system. Then we can talk about tax cuts, and what's probably even more important, we could start talking about paying down some of the public debt that we have.

I always find it ironic--and all of my business friends in Kingston whom I speak to from time to time, even they can't understand it--how we were able to get tax cuts for the last three or four years when in effect we were still running a deficit on an annual basis. As a matter of fact, this province went into debt by a further \$25 billion between the time the NDP government was finished back in 1995, and they had accumulated a debt of some \$88 billion, to right about now, when the public debt of this province is over \$115 billion. The other statistic that comes out of that, which I always find fascinating and which most people are completely disbelieving of, is the fact that even in these days of low interest rates we spend more on paying interest on the public debt on an annual basis than we do for all the social services of this province. Most people don't believe it or they find that a very hard statistic to understand. We've spent \$9.1 billion annually on interest on the public debt and, according to the government's own last budget, something like \$7.9 billion for social services.

But getting back to the medical field, the government likes to talk about how it has improved the situation. When waiting lists have increased, when emergency bypasses that we've heard about in the Toronto area have increased, when there haven't been any long-term-care beds built as yet, or they aren't available as yet--I know the government has promised to add something like 18,000 new beds, but as far as I know, not one single bed has so far been added to the system--when, in effect, 45 hospitals have been ordered closed in this province, I don't know how our health care system has improved. It hasn't improved. Even Duncan Sinclair, a man whom I've got great admiration for, a former neighbour of mine, a hard-working individual--remember he was the individual who headed up the health care restructuring





commission--admits that the whole premise of hospital restructuring and hospital closing was based on the fact that the community care facilities and services would be out there before these closures would take place.

I don't have any problem with the notion that whereas at one time people may have spent seven days, 14 days, 21 days in a hospital for a particular procedure, if they can be discharged to their homes earlier in a safe and competent way and be looked after properly, that we do it that way. I can remember being in the hospital some 40 years ago with an appendix operation. I was there for 17 days. Now it's a day or two or three and you're home, and that's fine. But it's based on one principle, and that is that once those people go home, there are necessary community care services available for them. Many elderly people get discharged on a daily basis. I heard a story over the weekend. This person, who has been somewhat sympathetic to the government from time to time, couldn't believe that her husband was being discharged when really she was not able to take care of him at home and there were no services available for this individual.

The point I'm trying to make is that there is nothing wrong with home care, there's nothing wrong with nursing care, but it has to be there for the people before they are discharged from hospitals. As a matter of fact, I would go even one step further. In the new sets of discussions and negotiations that undoubtedly are going to take place between the provincial governments and the federal government, we're going to have to start taking a look at mandated home care nursing services. If that is the wave of the future, then we'd better make sure those services are available. They may very well have to be made available under the Canada Health Act. Those are some of the new innovations we should be looking at.

Our party and our leader, Dalton McGuinty, have made a commitment that the system we are striving towards is that anyone who needs medical care will get it 24 hours a day, seven days a week. How anybody could disagree with that is beyond me.

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Surely if there's one area in which we are totally different from the Americans, it's our belief in our health care system and that everyone should be entitled to the best quality of health care that's available, regardless of how much money you have in your pockets. That is something that we in this country have believed in for the last 40 or 50 years, started initially by Tommy Douglas--give him full credit for it--and implemented by Mike Pearson and Paul Martin Sr many years ago.

Anything that takes away from that takes away from all of us. It takes away from our quality of life, and let's remember that as far as the United Nations is concerned, we have the best quality of life of any country in the world and our good-quality health care services, publicly funded health care services, completely totally accessible health care services form an integral part of that.

Rather than passing blame off from one level of government to the other, why don't we work together, particularly now that all governments across this province and across this country and all provinces pretty much have beaten the annual deficits. It's kind of interesting, as we're probably the last province to do that, and if you hadn't had your cuts for the last three or four years, in effect we would have been able to balance our budget some time ago. But the point is that we're now in a position to do something with the so-called fiscal dividend or with the excess money.

**Mr Mazzilli:** What about the federal fiscal dividend?

**Mr Gerretsen:** I grant you, sir, that the federal government will have to come to the table and all the provinces will have to come to the table as well.

*Interjection.*

**Mr Gerretsen:** I look forward to the gentleman's comments a little bit later on.

The other thing that's very interesting is something that really hasn't been talked about all that much, although I noticed that one day our Deputy Premier, the Finance Minister, got very upset about this. You





may recall that last year, \$1.3 billion of extra money was made available by the federal government to the provinces for health care. I understand that \$755 million or almost half of that money hasn't been expended into the health care system. It's been sitting in the bank gathering interest. What I can't understand is, if this government really needs the money to make our health care system the best in the world, then why the heck isn't it spending that money? Why is it banking that money?

**Hon Chris Stockwell (Minister of Labour):** Where? Chase Manhattan? Get a grip.

**Mr Gerretsen:** I've got a grip, all right, sir.

All you have to do--in the last two and a half minutes that I have left--is look at the tremendous chaos that you have created in the health care system in my own community of Kingston. The Health Services Restructuring Commission came in there and basically closed the hospital. It did even worse than that: It basically said to the other hospital, namely the Kingston General Hospital, "You can take over the Hotel Dieu Hospital and run your programs out of there," and that should have happened according to the health care restructuring order, I believe, some time late last year. It basically told a religious order that has been operating a hospital there for over 150 years that their services were no longer required, thank you very much. "Now the other hospital can now come in and run their programs out of your facility."

You can well imagine that for the people of my area, who have always had excellent care at both facilities, this was quite a shock. Petitions were taken up, signed by some 70,000 people. As a matter of fact, the matter went all the way to the Supreme Court. The Supreme Court ultimately ruled that the province could do what it wanted in that regard.

What happened of course ultimately was that the Premier came to town about three weeks ago for a fundraiser, and he was asked, "Why aren't you allowing the sisters to continue to run the Hotel Dieu Hospital, and keep their governance and keep their management of their facility?" The Premier said: "Oh, is that what you wanted? Yes, it's done." All of a sudden, on April 5, a letter went out from the Minister of Health to the board of directors that, first of all, says the sisters are allowed to continue to govern and manage the programs at the Hotel Dieu site until a new ambulatory outpatient facility is built. Sure, they're happy, but why did you cause this chaos for two years?

You did it once before with the ferry system, you may recall, where you were going to cut off their funding and these people would have had to raise the taxes on the two islands lying just outside of Kingston by something like 800% to 900%. Then all of a sudden the province came along and said: "Well, I guess we didn't mean it. We're going to fund you again."

Governing shouldn't be about threatening people. It shouldn't be about intimidating people. It should be about governing in the best interests of all of the people. That's one aspect that this government has forgotten. I implore them to get together with the feds, and let's get the best quality health care system we can in this province.

**Mr Gilles Bisson (Timmins-James Bay):** On a point of order, Mr Speaker: I have here some notes that I think would be important to bring to the attention of the Legislature.

**The Acting Speaker (Mr Brian Coburn):** That's not a point of order.

The member for Thornhill.

**Mrs Tina R. Molinari (Thornhill):** It's a pleasure today to speak on the Premier's resolution that "condemns the government of Canada for cutting, by \$4.2 billion annually, base payments under the federal program that supports health care, the CHST, while provincial governments have increased health spending." I will be sharing my time with my colleague and seatmate, the member from London-Fanshawe.

Since 1994-95, the federal government has cut \$4.2 billion from health care transfer payments. Over the same period, Ontario has increased spending on health care over \$3 billion. The 2000 budget was a big disappointment. The federal government failed to live up to its commitment to Ontarians. Once again the





federal government has failed to recognize the needs of the growing and aging population in Ontario: \$2.5 billion in one-time funding is clearly not enough.

I want to bring to the attention of the House the Economic Update. It's a special Budget 2000 edition that was put out by Maurizio Bevilacqua, MP, who is the chairman of the standing committee on finance. Under "Budget 2000 Priorities" it says: "Announces the fourth consecutive federal enrichment of the Canada Health and Social Transfer to help provinces and territories meet what Canadians have identified as their highest priorities: health care and higher education."

It goes on to say, under "Canada Health and Social Transfer," that "starting in 2000-01, CHST cash will reach \$15.5 billion, almost 25% higher than in 1998-99." The reality is that it is still \$4.2 billion less than it was in 1994-95.

Ontario has increased spending on health care by over \$3 billion. The only government that has cut funding for health care is the federal Liberals.

I turn in the same flyer to "Sound Financial Management," and I quote: "Total program spending in the coming year will be \$4 billion below the 1993-94 level." I wonder where that money is coming from.

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I also want to bring to your attention Budget 2000: Making Canada's Economy More Innovative. It's the Caplan report that was put out on a funding/budget town hall meeting. It goes on to talk about research and development, environmental technologies and sustainable practices, infrastructure--

**Hon Mr Stockwell:** Which Caplan?

**Mrs Molinari:** Elinor Caplan, the MP for Thornhill.

But any mention of health care funding and health and social transfer payments is suspiciously absent from this flyer. Coming from a previous health minister, it's truly a disgrace.

Where are the provincial Liberals and where do they stand on health care? I would like to quote the Globe and Mail, April 4, where McGuinty says, "If we don't modernize medicare we are going to lose medicare." He goes on to say, "I want a system where your doctor is part of a team of doctors, nurse practitioners and nurses, one of whom will always be available to you." In the same article, "Mr McGuinty later told reporters that he would not force the system of rostering and 24-hour care on doctors." He's quoted as saying, "I am convinced that if we make it a priority, people will want to work together on this." On one hand, he says he wants a system that will always be available; on the other hand, he says he will not force the 24-hour care for doctors.

I also want to quote a letter that was in this weekend's Toronto Star, Sunday, April 9. It's titled, "McGuinty Not Up To Job." I will read the letter.

"I find it laughable for Dalton McGuinty to accuse Premier Mike Harris of 'not being on the job' (March 31). McGuinty's one to talk.

"When the federal Liberals held their policy convention in February, the Ontario Liberal leader was nowhere to be found. In the weeks before that convention, Mike Harris and NDP Leader Howard Hampton signed a joint letter calling on the federal Liberals to increase health care spending.

"What did McGuinty do? He refused to stand up for Ontarians, he refused to call upon his federal cousins to reverse their health care spending cuts.

"Never mind not being on the job, when it comes to important issues like health care, McGuinty is not up to the job."

**Mr Gerretsen:** Who wrote that letter?





**Mrs Molinari:** The letter is written by Reg Jerome and it's to the Toronto Star.

Since 1995, our government has been expanding health care services to bring them closer to home for the people across Ontario. Because we restructured the hospital system, we have been able to make major reinvestments in our hospital facilities and in long-term care. There is \$1.2 billion of hospital construction underway, and we plan to spend another \$2 billion to continue improving and enhancing hospital services.

Thornhill is located in York region. It's in the southern part of York region. We are served by three main hospitals: York Central Hospital, Markham-Stouffville, and the York County Hospital.

In the southern corner of the York Central Hospital campus, something almost unprecedented in Ontario's health care system is happening. A new, 240-bed continuing care, long-term facility is being built for the people of southern York region. The people of Thornhill are very happy that we're recognizing the services where they're needed and putting them in place. The \$25-million expansion, along with the growth recommended for York Central Hospital by the Health Services Restructuring Commission, will double the hospital's size and budget. Expansion will also occur in other areas, such as the emergency department, critical care and obstetrics. Frank Lussing, the CEO, believes that the expansion will ultimately translate into a higher level of care for patients.

The new continuing care centre of 158,000 square feet features 100 nursing home beds, plus capacity to increase to 116; 90 chronic care beds; 32 rehabilitation beds; rehabilitation facilities; an adult day program for people with cognitive impairments, brain injuries and physical disabilities; and a community and hospital child care centre for 50 children.

The riding of Thornhill has benefited directly in addition to the 100 beds at York Central Hospital. The Baycrest Centre for Geriatric Care received a contract to build and operate a new 120-bed nursing home also servicing the Thornhill community. York region, as of the end of 1999, received \$192 million in increased health care funding since this government took office in 1995.

Our local paper, The Liberal, had a headline, "\$20 Million Invested in Child Mental Health." I want to congratulate the minister responsible for children, Margaret Marland, on the announcement recently of the investment of \$20 million that creates a four-point plan to improve children's mental health services. The four-point plan includes \$11.9 million for intensive child and family intervention services provided in homes, schools and communities; \$5.5 million for new mobile crisis response teams to respond to children and families in acute crisis when and where needed; \$400,000 for telepsychiatry access to highly specialized psychiatric services for children in 10 rural and remote communities; and \$2.2 million to serve more families and better identify and respond to increased service needs. This includes the use of province-wide intake instruments to help identify children who need immediate service, an assessment outcome instrument to assess an individual situation and monitor the effectiveness of treatment, and the introduction of a children's mental health information system.

The funding for telepsychiatry would allow physicians such as York County's Dr Leonora Pinhas, who helps treat teens with eating disorders, to lend their expertise to smaller hospitals without having to travel outside the community. The Health Services Restructuring Commission recommended that York County be funded to offer in-patient beds for mentally ill youth and was designated as the regional hospital responsible for child and adolescent mental health.

As the minister has stated several times, 50% of our health care resources is spent on 12.6% of our population--people over the age of 65. In just 10 years, the first of our baby boomers will reach 65, so we have to plan now and make sure that the health care system is prepared to meet the increased demand for health care services like long-term care.

All the provincial governments have been reforming health care for years while the federal government is still just talking about it. In 1996 the government began working with the Ontario Medical Association on new ways to provide patients with 24-hour, seven-day access to family doctors and other practitioners. Through our partnership in health care reform, over 200 doctors in seven communities





across the province will offer 24-hour health care to more than 375,000 patients to make sure they have access to the best possible health care.

I want to focus on another article in the Toronto Star, where the headline is "11¢ or 34¢: What is Ottawa's Health Payout?" We are talking about actual, permanent health care dollars for Ontarians, not some intangible benefit that was provided decades ago and has long since been reclaimed. The math is very simple: Ontario is spending \$20.8 billion, operating and capital, on health care in 2000-01. Federal health care dollars in Ontario, on the other hand, total \$2.3 billion. You do the math. That equals 11 cents of every health care dollar in Ontario. We demand that the federal government recognize and go back to the 50-50 that was originally planned and take an interest in all of the provinces' needs for more health care dollars.

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**Mr Mazzilli:** I'm pleased to join in this debate, and I want to thank everybody on this side of the House for sharing their time with me. I know this is an important part of what they believe in, and everyone wants an opportunity to speak in this debate. In my community of London we have the London Health Sciences Centre, which is a world-known health facility, and this is an important issue for them as well as for the St Joseph's Health Centre.

Let's focus on what this resolution says. Be it resolved that the Legislative Assembly of the province of Ontario:

"(a) Condemns the government of Canada for cutting, by \$4.2 billion annually, base payments under the federal program that supports health care, the CHST, while provincial governments have increased health spending;

"(b) Urges the government of Canada to" withdraw "the statement attributed to a spokesperson for the federal finance minister, the Honourable Paul Martin, that increasing health funding would be 'just shovelling money into a hole that's going to open right back up again';

"(c) Urges the government of Canada immediately to restore permanently the health funding that it has cut and to assume its fair share of increased, ongoing funding to meet the health needs of our country's aging and growing population;

"(d) Reminds the federal Minister of Health, the Honourable Allan Rock, that the sincerity of his commitment to medicare and the principles of the Canada Health Act would be best demonstrated not by idle rhetoric and vague words but by restoring the health funding he has" slashed.

Ontario has received no answer from the Prime Minister, who has refused to meet with the premiers over this issue. It's an important issue because, in order for us to sustain a health care system in our province, the federal Liberals must restore the \$4.2 billion they have slashed.

Ontario is the leader in health care. We have increased funding from \$17.4 billion in 1995-96 to \$20.8 billion in 1999-2000. In contrast, Ontario will receive \$1.7 billion less from Ottawa, or from the federal Liberals, under the CHST than it received in 1994-95. I guess that's the thanks Ontario gets, the thanks Ontario workers get for creating a vibrant economy that has filled the federal Liberals' coffers in Ottawa. They have surpluses at this stage.

This is about priorities. The Mike Harris tax cuts have not only eliminated the provincial deficit once and for all, which needed to be done, but it has also eliminated the federal deficit once and for all, bringing the federal Liberals into a surplus. So what did Ontario do? What did the leadership of Mike Harris do with this growing economy? It invested it in health care by increasing the funding. What did the federal Liberals invest in? Let me tell you what they invested in: \$3 billion in HRDC grants--allegedly, for about \$1 billion there is no paperwork to be found for where this money went.

Who benefited from that \$3 billion? Certainly not real Ontarians. In some cases, we've heard that some multinational companies received millions of dollars in grants, while Ontario taxpayers, real Ontarians





with real needs, have received nothing from the federal Liberals.

It's interesting that the member from Kingston talks about tax cuts not being important, because we now know what the Liberal position really is. Tax cuts are not an option--

**Mr Gerretsen:** On a point of order, Mr Speaker: The member should not state something in the House that I didn't say. He should stick to the truth at all times.

**Mr Mazzilli:** It's interesting that the Liberals don't want to take a position. On one hand, when they enter the debate they say, "You shouldn't cut taxes." Then, when you say they said that, of course they deny it. There's no leadership on that side of the House. Dalton McGuinty clearly is not up to the job.

The Mike Harris government will continue to cut taxes, which will continue, at this point, till the deficit is eliminated, create a surplus, pay down the debt and reinvest in health care. But while we're doing that, the federal government is reaping the benefits of approximately one third of Canada's population being in Ontario, the growing economy. They have filled their pockets on the backs of Ontario workers, on the backs of Ontario small business people.

And through this, what do they do with it? Where are their priorities? Well, in the Prime Minister's riding, of course. We hear about it; most of us have not seen it because real Ontarians are going to work every day, paying their taxes. In the Prime Minister's riding, with taxpayer-funded money, they're building fountains. That is clearly not a priority for real Ontarians. We will continue, on this side of the House, to make real changes that benefit real people.

At this point in time, the only ones who see fit for this resolution not to pass are Dalton McGuinty and the Liberals. With the NDP, Howard Hampton has clearly demonstrated leadership. He has seen that the NDP and its supporters believe that Ottawa is shortchanging Ontario workers, and fully supports this resolution. Again, the NDP and the Conservative government will continue to support real changes that benefit real people, and the Liberals clearly are not up to the job.

**Mr Sean G. Conway (Renfrew-Nipissing-Pembroke):** I am pleased this afternoon to have an opportunity on behalf of my constituents to address the health care debate, which is, as I think all members understand from talking to their constituents--and I suspect not just in Ontario but in Alberta and New Brunswick--the pre-eminent concern of citizens, regardless of where they live in Canada.

I want to begin my remarks today by asking members, if they didn't hear this broadcast, to see if they can access the tape. I think it was last Tuesday that CBC Radio ran a radio commentary slot at 8:15 in the morning from a woman in a hospital bed in Ottawa, a woman, as I recall, who was seriously ill and who was speaking, from the perspective of a citizen in need of help and hospital services, about the current health care debate and addressing her remarks to the community at large. I must say I found that commentary a powerful and an arresting one. As I've listened to this debate today and last week, I wonder what that woman in Ottawa would think of all of us as to the kind of debate that's going on here and elsewhere.

At the risk of being a little censorious, let me say that if I were in a hospital bed and I was listening to this debate, I'm not so sure that I would feel particularly confident about the ability of the political class in 2000 to solve my problem.

I just simply want to make the point that if you didn't hear that broadcast, it might be a useful thing for honourable members, seized of their political instincts, to go back and ask CBC to rebroadcast for your edification that two- or three-minute testimonial from that woman at the Ottawa hospital.

I can tell you that as I travel around my constituency in eastern Ontario, whether it's in a larger town or city like Pembroke, or in rural communities like Douglas and Westmeath or the research community up at Chalk River, Deep River, everywhere I go people tell me of their concern and their increasing upset about what is happening or not happening to their local hospital, to their health service and to, quite frankly--how shall I say this politely?--just a general frustration that the politicians of whatever stripe just don't seem to get it.





I think, and I can say this because I've been around here I guess longer than any of the rest of you, that we're playing with fire, all of us, if we think we can glide through this with just some kind of a trite, predictable political response. Are there problems? Yes. Is there blame to go around? Absolutely. There's not a provincial government, whether it's Tory, Liberal, Social Credit, New Democrat, nor is there a federal government that does not have blame to accept. Are there opportunities? Absolutely. I would hope that it is within the interests and the power of my generation to amend and to adjust a plan that was developed by my parents' generation, a public health plan that more and more Canadians feel is a fundamental part of their Canadian entitlement and citizenship.

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You know, it's interesting to me, as I listen to the debate these days, where it came from. This hospital and medical plan of ours is one of the crowning achievements of the generation of the Great Depression and the war. People of my parents' generation went through a great deal of deprivation and loss, and one of the decisions I think they made collectively was that they were going to provide for their children a better life than they had had themselves. They hadn't fought and died in western Europe and in Asia to return to the society of the 1920s and 1930s. They wanted something better. When the Parliament of Canada enacted, in 1957, the Hospital Insurance Act, and when it enacted a decade later the Medical Care Act, it enacted two pieces of legislation that enjoyed broad-based support in the community. The last thing the St Laurent government did before it went to the polls in an election that it lost in the summer of 1957 was to proclaim the Hospital Insurance Act of 1957. The Diefenbaker government which took office a few months later did not change in any significant way that commitment; in fact, I think it's fair to say that the Diefenbaker government actually improved the Hospital Insurance Act of 1957. I tell that story simply to remind us of what we are dealing with here.

Again, if you have an idle moment, I would say to my friends, all of them, go up to the library--in fact, I brought a couple of volumes down here today. Two of the people of that generation in the political class most associated with public health insurance in this country were Paul Martin Sr and Tommy Douglas. I'm not going to bore you with a long story about their upbringing, except that in both cases they had one particular thing in common: A young Tommy Douglas, while he was in Scotland, was afflicted with osteomyelitis that caused young Mr Douglas and his family a great deal of personal and financial hardship over many years. Paul Martin Sr, who grew up in Pembroke, was stricken as a very young boy with spinal meningitis. He couldn't walk for the first seven or eight or nine years of his young life. Is it any wonder that people like Paul Martin Sr and Tommy Douglas had a commitment to hospital and medical insurance? No wonder at all, because they and their families understood keenly the enormous problems, financial and otherwise, that attached to regular families if they did not have or could not get or afford hospital or medical insurance. That's why we in my generation have had the benefits of the programs that we have come to take for granted.

**Mr Bisson:** Thank you, Tommy Douglas.

**Mr Conway:** And the whole generation of people who made it possible. I'm in this debate today because one of the things that concerns me most is a growing sense among my generation of, "Let's throw these commitments to the wind and let's go back to a market-driven health and medical insurance plan." Well, I stand here on behalf of the tens of thousands of people I represent to say, over my dead political body will that happen. I understand how the rich and the powerful will applaud that, but I'll tell you, if you are a farmer in the Ottawa Valley, a retail clerk in Pembroke--the vast majority of people I represent, according to Statistics Canada, are below the provincial household income level. One of the most important programs they get from government is the health insurance plan. They want me as their representative to stand here and say, "Support that plan and fix that plan, but do not reduce that plan or reduce my entitlement to quality hospital and medical insurance, particularly in rural, small-town eastern Ontario, when and where I need it." That point of principle I want to stand and affirm as categorically as I can.

When I read the press today and I hear all of this twaddle about, "Let the market decide"--well, let me tell you, if you were a logger in Barry's Bay, a farmer in Westmeath, a shopkeeper in Chalk River, the health market is probably not going to be very interested in you or is not going to treat you with very





much justice if history is any guide. What was done with medicare was to bring underserved areas like rural Canada, rural and northern Ontario, up to an acceptable standard that has been enjoyed and taken for granted in a number of other, largely urban, communities around the country.

I want to make it very clear, medicare has been an enormous social and economic advance for the people I represent, and it is a scandal that parliaments and legislatures of this land, more prosperous today than at any time since the end of the war, are hacking, cutting and subtracting from it, at a time when our cup runneth over.

Now, I'm not here to say that all is well with the plan. I look back at some of the design of the medical care plan of the 1960s and say, "This plan would not and could not stand, for example, demographic changes of the late 20th century." It's clear that the architects of the plan in the mid-1960s reflected a society that was, on average, much younger and much less technologically advanced than we are today.

I'm not one of those people who stand here and say that everything the United States has done in health and medical coverage is bad, because it's not. I think one can go into places like Minnesota, for example, and find some very interesting models of good health care delivery, particularly in rural communities. But, you know, the Americans can do a number of things that we're not able to do, because they simply say 30% of the population is left on its own, with little or no coverage. Well, if you take that as a position, let me tell you, for the other 60% or 70% or 80% you can provide better coverage.

There is something basic to the Canadian instinct that I think we should be proud of that says there should be general coverage for all citizens. Remember what health insurance is philosophically: It is a commitment by the well to help look after the sick. That's what it is philosophically. Let the market decide? I'll tell you what the market will do with a young Tommy Douglas, with his osteomyelitis, or a young Paul Martin with spinal meningitis. You all know what a market would do. Does anybody here, other than the editorial writers of the National Post, want to return to that kind of antediluvian world? I don't. I can't believe that anybody elected to responsible office in 2000 wants to turn the clock back.

I remember as well, 22 years ago, being honoured with membership on the select committee of the Ontario Legislature looking at health care costs and financing. It's an interesting report, ably chaired by Dr Elgie and Bruce McCaffrey, known to some of you people opposite. What did we find out in 1978? That's almost a generation ago. We found out then what we know today: that we're spending basically what Emmett Hall said in his royal commission back in the early 1960s we would be spending in 1978 or now in 2000. Yes, we're going to spend more money, because our population is aging. I forget the statistics, but I think the health planners tell us that we will consume something like 75% to 80% of all our hospital and medical services in the last three months of our lives. If you think about that, it probably makes some sense. So as this population ages, yes, we are going to be spending more money, in relative and absolute terms, and we're going to have to come to terms with that. Yes, we're going to have to reconfigure a system that was built at a time when the demographics and the technological realities were quite otherwise.

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One of the things the politicians of my ilk--and it was a tripartisan commitment back in the 1970s and 1980s. We all said, all of us, "We need less institutional care and more community care." We were deficient, if not gutless, in a couple of respects. We never seemed to understand or we certainly didn't want to admit that that meant something. That meant hospitals were going to have to close--very painful--but we never much confessed it.

People have said, "Well, you didn't do anything for 10, 15 or 20 years on the hospital front." Another accurate charge. The reason we didn't, as I've said here before, was that back in 1973-74 Frank S. Miller, B Eng, MPP, Minister of Health, went out into western Ontario with a plan to downsize and close some hospitals. And how far did he get? I am not here to pass recriminations, because it was a bipartisan assault led by people like Larry Grossman and Eddie Sargent. The only hospital that was closed in about 20 years was the East Parry Sound General up at Burk's Falls, and it was reopened about six months or a year into the Harris government's mandate, for reasons that I entirely understand. So yes, there have to be adjustments and yes, we're going to be spending more money.





One of the questions I have for the health planners is, we are talking today about more and more community care. There's a massive privatization involved in community care because built into that is the assumption that the family is going to carry a much bigger part of the load. My question, particularly for suburban Canada in 2000, is, who's at home to do the heavy lifting with the 85-year-old parent who is increasingly frail but does not yet meet the requirements for an admission to a long-term-care facility or chronic care hospital? Who's at home in Surrey, British Columbia, in Kanata, Ontario or, quite frankly, increasingly in the rural Ottawa Valley that I represent? Who's at home who's willing and able to do the heavy lifting over months and perhaps years? Has anybody really thought that through?

When I look at the current debate, I am enraged and I'm humiliated to see governments spending millions of dollars on ad campaigns, one attacking the other. I meet nurses, I meet technologists, I meet volunteers in places--I was a patient the other day in one of my community hospitals. I must say, not a big deal, a self-inflicted leg problem from a little fall on some winter ice. One of the things that I want to say today is, the small community hospitals--Arnprior, Renfrew, Deep River, Barry's Bay and certainly the Pembroke General in my community--provide a very good level of care. I met a person from Ottawa the other day who had come up to their cottage at Calabogie and was actually getting some treatment done at the Arnprior hospital because they found it very patient- and user-friendly. Not that the Ottawa hospitals are less able, but people understand, just as they do around the Pembroke General, that restructuring has just begun.

As my friend from Kingston rightly observed, we are a long way from the completion of that story, press reports the other day reminding members of the Legislature and the Ontario citizens generally about just how far away we are from meeting targets. Every time I get a press release from the Ministry of Health, I see another substantially enhanced allocation for an about-to-be-restructured hospital because the original estimates were wildly off the mark and understated.

I read about more and more communities having to go to their upper- or lower-tier municipalities to go at the property tax base to raise tens of millions of dollars. We are a long way from completing that story. It's certainly not easy. I have my own very strongly held views. I'm not going to take today to grind a lot of axes.

I have to say to the Premier of Ontario that when I look at this resolution of his, I am not very impressed. It is the best and worst of old Mitch Hepburn, and I can say that as somebody who knew something about old Mitch. Boy, a great dust-up between Queen's Park and Ottawa.

My question is, how many sick people, how many needy people is that going to help? If I were the Minister of Finance for Canada, I've got to tell you, when I listen to these provincial finance and health ministers going on about tax points, I'd be very tempted to say: "All right, all right, I hear you. Let's just pull that back and we will make it directly targeted funding." I don't have much sympathy for Ottawa, because they were told by Parliament and they were told by a lot of other people that their retreat was going to lead to precisely this kind of a day. That's why there is a lot of blame to go around.

I just simply want to say, on behalf of people in communities like Calabogie and Killaloe and Stonecliffe and Douglas and La Passe, members of Parliament, members of the Legislature, cut the crap, stop the partisan bickering and get on with fixing the problem. Get on with fixing the problem because I am losing my patience with the inability of the political class to fix and adjust and amend, as I know it must be adjusted and amended, a core economic and social benefit that my parents and grandparents fought and worked so very hard to put in place and that you people don't understand, or seem not to understand, the centrality and the importance of. Big, fat, wealthy Ontario is the last group of men and women who should be complaining about their financial incapacity to provide an adequate level of hospital and community-based health care in this first year of the new millennium.

**Mr Howard Hampton (Kenora-Rainy River):** I am very pleased to have an opportunity to take part in this debate and I am pleased that we're having this debate. I see this debate as the foreshadowing of another debate which I believe needs to happen.

As you know, I've been calling for a leaders' debate on health care. I want people to see clearly where





the leaders of the three parties stand. This debate will help us to cut away some of the fog, but a leaders' debate would help us to further ensure that some of the fog is cut away and people in Ontario could clearly see the choices for them.

What's the problem? Why are we here? We're here, first of all, because Liberals in Ottawa some time ago decided that health care funding wasn't a priority any more. When you sort through everything they've done on health care, you find they have cut, on an annual basis, \$4.2 billion from health care funding. Worse than that, in the most recent budget, the Liberals in Ottawa, instead of replacing the money that's been cut from health care, put \$58 billion into tax cuts for the well-off and corporations and could find only \$1.25 billion for health care. In other words, for Liberals in Ottawa, their priority isn't health care. Their priority is the same tax cuts for the well-off and corporations that is the priority for the Harris government. The Liberals in Ottawa talk a good line about medicare, but at the end of the day they have the same priority as Mike Harris and his government in Ontario: Tax cuts for the well-off and corporations come before health care funding.

What happens as a result of that? What happens when Liberals in Ottawa and Conservatives in Ontario would rather finance tax cuts for the well-off? I can tell you what happens. What happens is this: Governments like the Harris government in Ontario and the Klein government in Alberta use the then underfunding of health care as an excuse to move more and more of the health care over to private, for-profit, American-style health care. That's what's happening in Ontario. There's all kinds of evidence of that.

1630

Look at what is happening in home care. Five years ago in Ontario, home care was for the most part being delivered by not-for-profit community agencies like the Victorian Order of Nurses, St Elizabeth and the Red Cross. What's happening now in Ontario? More and more of home care is being delivered by private, for-profit corporations like Olsten, an American private, for-profit health care organization which has a terrible record in the United States.

What's happening in long-term care? Seventy per cent of the new long-term-care beds that have been announced in Ontario are going to be put over to private, for-profit deliverers.

What's happening in ambulances? The Harris government is downloading ambulances on to municipalities, and not providing municipalities with any money to run them. Municipalities are already cash-strapped because of earlier downloading, and so municipalities, as we're already seeing, are looking at private, for-profit delivery.

Public health, which is so important in terms of ensuring that our citizens have the information and the tools they need to take greater responsibility for their own health, is being downloaded on to municipalities without any additional money. Municipalities are already cash-strapped, caught between a rock and a hard place, and they're looking at turning some areas of that over to private delivery.

If we look at home care, long-term care, ambulances and public health, piece by piece this government is moving Ontario's health care system to the American-style, private, for-profit delivery.

What do the Liberals in Ottawa have to say about it? What the Liberals in Ottawa are doing, because of the kinds of cuts they have made, is simply opening the door and holding open the door for this kind of privatization of our health care system, for this kind of undermining of medicare.

Why is it wrong to move to the American style? I want to say this clearly so people across Ontario understand. Americans actually spend more money on health care than we do in Ontario. They spend more per capita than we do in Canada. The Americans spend about 13% of their GNP, 13 cents on the dollar, on health care. We spend about nine cents on the dollar in Canada. The Americans spend more money, but at the end of the day, when you look at it, 42 million Americans have no health insurance whatsoever. People need to understand that it's working people, it's people who have a job and pay taxes. 42 million of them, who have no health insurance in the United States. There's another 55 million Americans who think they have health insurance but when you read the exemption clauses, the exclusion





clauses, the exception clauses, the limitation clauses, they're not ensured for anything. So, literally, close to 100 million Americans have in effect no health insurance. Over a third of the people who live in that country don't have health insurance, yet they spend far more on health care than we do.

Why would anyone want to adopt a system that spends more money but leaves over a third of the population out of health care coverage? That's where we're going. That's where the Harris government is taking us, that's where the Klein government is taking us, and the Liberals in Ottawa are holding open the door to allow that to happen. What is even worse? Rather than either the Liberals in Ottawa or the Conservatives in Ontario showing any leadership, what do they do? They engage in advertising programs to blame one another while something that is a Canadian institution, something that we are recognized around the world for, the quality of our health care system, is being undermined. Liberals in Ottawa and Conservatives in Ontario do nothing more than spend millions of dollars blaming each other. I say, a pox on both their houses, shame on both their houses.

What needs to happen so that Canadians and Ontarians can have the kind of quality health care system that we need if we're going to live productively in an increasingly sophisticated society? First, the Liberals in Ottawa have to stop talking about medicare and have to put the \$4.2 billion back in. That has to happen and it has to happen now. The \$4.2 billion would be on the short end, because since that money was cut our population has aged, our population has grown, and something called inflation has eaten away at least 1.5% a year. Putting back \$4.2 billion a year into health care funding would just be the minimal effort that is needed from the Liberals in Ottawa.

But the Liberals in Ottawa have to do something else: They have to stop their rhetoric about the Canada Health Act and do something to enforce the Canada Health Act. The Liberals in Ottawa have allowed this government to piecemeal change medicare into private, for-profit American medicine, and they've allowed Ralph Klein in Alberta to do the same thing. For the years that the Liberals have been in power in Ottawa, they have done nothing, absolutely nothing, to enforce the Canada Health Act. As I say, the only thing that they've done, besides not enforce the Canada Health Act, is to hold open that door to ensure privatization happens and happens quickly.

So those are the first two things the Liberals have to do. But then something has to happen here in Ontario. I'm intrigued, listening to Mr Harris and the Liberal leader, Mr McGuinty. Mr Harris has been saying since 1985 that he believes in primary health care reform. He believes that we have to do something in terms of primary health care reform, move away from fee-for-service and move to physicians and nurse practitioners and nurses working in teams where they're paid a salary and we get rid of the inefficient fee-for-service system.

He has been saying that since 1985. We've now had two sets of negotiations with the Ontario Medical Association, and nothing has happened. What does he say when he's questioned about that? Well, he believes in a voluntary change. A voluntary change. Then the other day Mr McGuinty was spouting off about how he believes in primary health care reform, but at the end of his statements, what does he say? He says the same thing Mike Harris says, that this should be voluntary. Intriguing. The more I read the fine print, the more I find there is absolutely no difference between the position of the Conservatives over there, the Liberals over here and the Liberals in Ottawa. They're all drinking out of the same trough and they all spew the same empty propaganda.

I want to say categorically that unless there is some leadership shown on primary health care reform, it won't happen. If it doesn't happen, medicare will be further undermined by Liberals and Conservatives. It must happen, and it must happen now. Why is it so important? It's so important because what we see in Ontario today are all kinds of families who do not have a family doctor. The doctor is not in for them. At the same time, we see nurse practitioners, who can perform many of the health care services people need, yet there is no effective mechanism for them to be utilized in Ontario. We see nurses who have skills and those skills are being underutilized.

Let me give you an example. I'll use something out of my own medical history. Many people will note that I have a bit of a scar above my right lip. I got that playing hockey in my hometown. A friend of mine lost his balance, his stick came up, got under my shield and cut my lip. It just so happened that another friend of mine, a physician, was on the ice and said: "Come on, we're going to go to the





emergency room. We're going to stitch you up." When we got to the emergency room, he looked at me and he said, "I'm going to give you a lesson in health care economics." He pointed to the emergency room nurse and he said: "You know that nurse over there, she does better stitches than I do. Based upon her salary, at about \$25 an hour, it would take her a few minutes to stitch up your lip. It might cost the health care system \$10 for material, her time and everything. When you came back in, in five days, it would take her 30 seconds to take the stitches out. It would cost virtually nothing."

He said, "I'm going to do this procedure, though, because under the rules in Ontario now, the fee-for-service rules, I as a physician get to do this, and as an emergency procedure, I'm going to charge the system close to \$100, and when you come back six days from now and I take the stitches out, I'm going to charge the health care system more money." He said, "Howie, can you explain to me why I'm going to do the stitches and charge the health care system over \$100, when that nurse over there can do it for \$10 or less and she does better stitches than I do?"

That is the essence of primary care reform. There are too many services now where the rules say, "A physician must do this." A physician sees the patient for 30 seconds, two minutes, and then the nurse performs all of the procedure. This is a very inefficient system.

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Moving to a system where physicians work in teams with nurse practitioners, with nurses, with other health care providers, where they are on salary--we have a decent pension system; the overhead is covered--would allow us to use to the optimum the skill, the knowledge, the ability of nurse practitioners, and the skill, the knowledge, the ability of nurses, and it would free up physicians so that physicians could be there for all the families of Ontario, not just a few.

The Conservatives under Mr Harris and the Liberals under Mr McGuinty show no leadership. They are not prepared to show some leadership on this; they are prepared to let it dwindle away. Let me say that New Democrats are prepared to show leadership on this. We insist there must be primary care reform in Ontario and it must happen now.

Let me give you another example of what needs to be done, in my view. We know, from report after report in Ontario, federally, from other countries in western Europe and states in the United States, that if you want to make some really cost-effective investments in health care, one of the things we should be investing in are the things that prevent people from becoming ill, the things that help people to exercise more control over their own health, that help people to be well. What are some of those things? Affordable housing is one of them. Lack of quality housing is intimately linked to poor health. If people don't have adequate, affordable housing, their health deteriorates very quickly.

All you have to do is walk into any one of the emergency shelters here in Toronto and look at the standard of health of people who are being forced to live in those emergency shelters; the incidence of tuberculosis; the incidence of things like the flu, pneumonia; the problems of mental health that result. Because this government and the Liberals in Ottawa refuse to invest even a little bit in affordable housing, the health of literally tens of thousands of people is degrading on virtually a daily basis--a very simple investment. In fact, the investment in affordable housing would cost less than what is being spent now on these emergency shelters, which get us nothing in terms of quality of people's health.

What else could we do? It's very clear that when people don't have an adequate income their health deteriorates. I would say to this government, if you want to have an impact on people's health, raise the minimum wage so it can be a living wage, so that people can afford to buy the food, have the clothes on their back and a roof over their head and buy some of the medicine that they and their children need in order to sustain their health--a very simple thing, very cost-effective.

What's another? The linkage between smoking and serious diseases like cancer, heart disease, hardening of the arteries, a number of other lung disorders, is overwhelming. Yet, at both the federal and provincial levels, there is still not a serious strategy to help people stop smoking and to prevent people from ever beginning to smoke.





These are simple, practical, workable things that could be done, but they're not being done here by this government and they're not being done by Liberals in Ottawa. Instead, each of them is contributing to the further Americanization, the further privatization of what has been one of the best health care systems in the world, and when the public catches them at it, they blame one another.

Those are the kinds of thing that we need to do. Those are the kinds of things that we as New Democrats are going to bring to this Legislature because we insist that this debate must continue. We are going to present a private member's bill. I call it the Tommy Douglas Act to preserve Medicare, after Tommy Douglas, who was the person who has done the most in Canada to pave the way to fight the battles, to take on a doctors' strike, to ensure that medicare was enacted.

What do we intend to do through that act? I want to outline what it's all about. We intend the Tommy Douglas Act to slam the door on any further plans to privatize and move to an American health care system. What will it do? It will do a couple of things.

First of all it will ensure that, in terms of long-term care, there is no further move toward private, for-profit delivery of long-term care; second, it will put the brakes on the further privatization and further for-profit delivery of home care, and it will ensure, over stated deadlines, that we move back to a system where it is integrated, publicly funded, publicly administered, where we can get the kinds of savings that come when you have a fully integrated system.

Perhaps people don't understand what I mean by an "integrated" system. I simply want to say that all you need to do is look at some of the things that go on in the American health care system. Recently I had the chance to talk with a physician in Windsor who worked in a hospital in California. He related the difference. He said this was a private hospital in California. They dealt with a number of insurance companies. He said that the thing that was most absurd to him was the fact that the hospital actually had as large a department of clerks for dealing with the private insurance companies as they had nurses. Can you imagine that--a health-care system where you spend as much money dealing with the private insurance companies as you budget for nurses to look after patients?

That's what happens when you move to that American private, for-profit delivery. You spend more and more money because you don't have an integrated system. We want an integrated system, and that's why we're going to present the Tommy Douglas Act to preserve Medicare in Ontario, and we will have the debate then. There needs to be, still, a leaders' debate on this issue in Ontario so that we can present clearly to people the choices they have.

**Mr Doug Galt (Northumberland):** I appreciate the standing ovation as I begin my presentation for the next 20 minutes or so--very thoughtful on their part.

I enthusiastically support the resolution that has been brought forward by the Premier of Ontario: "Be it resolved that the Legislative Assembly of the province of Ontario,

"(a) Condemns the government of Canada for cutting, by \$4.2 billion annually, base payments under the federal program that supports health care, the CHST, while provincial governments have increased health spending." I can't understand how anybody could possibly disagree with that particular part of the resolution.

"(b) Urges the government of Canada to repudiate the statement attributed to a spokesperson for the federal finance minister, the Honourable Paul Martin, that increasing health funding would be 'just shovelling money into a hole that's going to open right back up again.'" Who designed the Canada Health Act in the first place? Of course it was a federal Liberal government, and it's hard to believe that they'd come back and say it's like shovelling money into a black hole when they started out with 50% funding.

"(c) Urges the government of Canada immediately to restore permanently the health funding that it has cut and to assume its fair share of increased, ongoing funding to met the health needs of our country's aging and growing population."





We're not asking to go back to the 50%; we're just asking to go back to the level in 1994. That's not a horrendous step from where we're at: \$4.2 billion for Canada, \$1.7 billion for Ontario.

Indeed, the final point in this resolution: "(d) Reminds the federal Minister of Health, the Honourable Allan Rock, that the sincerity of his commitment to medicare and the principles of the Canada Health Act would be best demonstrated not by idle rhetoric and vague words but by restoring the health funding he has cut."

There's no question that our government believes very much in the Canada Health Act. It's very unfortunate that the federal government can't say the same thing. With the way they've been reducing funding, it's obvious that they do not support this Canada Health Act. Maybe they did once upon a time, but it may be something like the Minister of Finance's staff saying, "Just shovelling money into a hole that's going to open right back up again." That's how much they believe in the Canada Health Act.

1650

I think it's rather unfortunate that we've got to the point in Ontario where money had to be spent to expose the federal Liberals as to what they're really doing on health care. Now the people of Ontario are starting to understand what we have been struggling with for the last five years. We're spending some 50 cents per family to try and recoup some \$650 per family on an annual basis. That strikes me as being a reasonable investment, and the feds are coming back, talking about tax points and totally confusing the public, but they're starting to understand this 11 cents. It started out at 50 cents; now it's 11 cents. If you were to look at the calendar, 11%, would suggest that the federal government is funding health care in Ontario from January 1 to February 9. From February 10 to December 31, the total funding would come from the province of Ontario. That's one way of looking at 11% versus 89%. I think it makes a lot of sense to look at it in that respect, especially when the Fraser Institute has drawn a comparison to tax freedom day. You might call that a health freedom day for the federal government come February 10, although that same government lays the taxes on us, so we don't get a tax freedom day until late into June, although the government of Ontario certainly backed that up considerably, with our reduction in income tax and some of the payroll taxes that have been reduced in Ontario.

When we took office, approximately \$17.4 billion was being spent on health care. That particular year, that increased to \$17.6 billion that was actually spent. Currently, we're looking at a budget of \$20.6 billion. That's an increase of \$3 billion, and it's probably going to end up more around \$20.8 billion. So you can see from the time we took office to the present time, it's well in excess of \$3 billion, and we have compensated for those reductions from the federal government. Unfortunately, if it would just come down to the 11%, that might not have been too bad to begin with, but it went all the way down to slightly under 8% when they made those cuts a few years ago, and they're taking great pride in bringing it back up to the 11% level. I think it's about time they took it back to the 1994 level. We're not talking about 50%, which would be very nice, if they would come back to the level they started out at, but it's probably not going to happen.

We hear a lot from the Liberals about what they're going to do with a health care plan. Back in 1997, Dalton McGuinty said he was going to roll out their Liberal health plan, and I haven't seen it. In 1999, at election time, he said again they were going to roll out a health care plan. We're still waiting for it. You know, if they just got together with the Liberals in Ottawa, I'm sure all this advertising wouldn't have been necessary. They can do something other than just complain and criticize the present government. They could work with the government to try and get a fair share from the government of Canada. When you talk about the government of Canada, the federal Liberals, in terms of fiscal responsibility, which is totally lacking there--you look at the things they've been doing: raising the employment insurance rates, raising the Canada pension plan costs--they're raising those faster than we can cut taxes, and it makes it difficult for some Ontarians to really appreciate that there has been a tax cut in Ontario. It's very accidental that the federal Liberals have actually balanced their budget. It's only the tax cuts and the fiscal responsibility in Ontario that stimulated the economy that have given them the chance to get those dollars through the high taxes they have. If it hadn't been for the province of Ontario, I can assure you that the federal government would never, ever have balanced its budget. They'd still be wallowing around in deficit for some time to come.





It's interesting to look at some of the quotes we've seen. Brian Tobin, the Liberal Premier of Newfoundland, who also was in Chrétien's cabinet, said, "We need to put our money where our mouth is," referring to the feds. I don't know how long we've been dialling 911 from the provinces, but the feds don't pick up the phone. Then in Calgary on March 10, Allan Rock said: "All the innovations in the world will not sustain our public health care system unless it's adequately funded by governments. Preserving medicare is going to cost more than words and the federal government must be there to do its share." I couldn't agree more with Minister Rock's comments. You would think he'd get aboard and make sure Martin had the dollars that are necessary to fund this.

When I think of the health care crisis, all I can think of is the front page of the Toronto Star. That's where the biggest health care crisis is going on in Ontario, and in the Liberal caucus as they chase ambulances to come up with new and different stories. I don't know which ambulances they chase to get these stories, but that's where the health care crisis seems to be in Ontario, other than funding, and I can understand the concerns with funding.

On the health care crisis and the concerns, I'd like to share a letter with you--it's in my words because the letter was back in January and I don't have it with me. It was in the local community press. A woman from the community of Tweed came to Scarborough because her mother had the flu. They called 911 because she didn't know how she was going to be able to move her mother; she seemed to be immobile. The ambulance came, non-emergency, and they loaded her mother on to the stretcher and put her into the ambulance. They said, "Where would you like her to go?" and she said, "Scarborough Grace." They radioed ahead to the hospital, but it was on critical bypass. So they radioed some other hospitals in the area and they were also on critical bypass. We often hear these stories here, don't we?

Finally the daughter from Tweed said, "I don't want to go way out to west Toronto to look after my mother when she's in the hospital." The paramedic said, "If I help you get her into the car and you drive over to Scarborough Grace, I think they'll probably take her." So they did. The daughter was thinking: "When I get over there, I'm going to have to wait eight or 10 hours. The emergency room will be jammed, and it will be quite a while before they see my mother." She went over and parked her car in front of the emergency entrance and walked in. Do you know, there wasn't a soul in that emergency room--not a single soul. She got a wheelchair, went out, got her mother and took her in, and she was seen immediately. This was a hospital on critical care bypass. I don't know whether the other hospitals had anybody in emergency, but this was Scarborough Grace, on critical care bypass, and the mother was seen right away. The last line in the letter said, "Who is playing games with whom?" I suggest that some of the Liberal games we see being played in this House are similar to that letter.

I had an experience this past summer. I was in and out of four different hospitals overnight, two or three times in one. I was very impressed with the triage approach to handling my problem, which was a kidney stone. It was kind of tender at the time. I appreciated getting to the front of the line quickly. When I went back for some routine X-rays, three or four other people passed me. Triage is working extremely well in our hospitals.

Then I was in and out of the Trenton Memorial hospital, an excellent hospital. Right now we're building a new one there. Mr Speaker, you may recall that your government promised to build that hospital back in the late 1980s. I'm sure the NDP will remember that they again promised to build it in the early 1990s. It's finally being done under this government, and they're quite pleased with that.

I'm getting sidetracked in my story. My mother-in-law was in there for over two months, and I was going in to see her. Again, there wasn't an ongoing crisis in that emergency ward. Generally, two or three people were in the emergency waiting room when I would go through.

I'm coming back to the point I made earlier: I think the crisis is in the Liberal caucus and on the front page of the Liberal Star.

I hear an awful lot of talk about restructuring. The feds are coming back and saying, "We'll give you more money if you spend it all on health care, and we might consider giving you more if you were to restructure." That was what the members of the Liberal official opposition were so critical of the Health Services Restructuring Commission for. It was tough. We knew it was going to be tough going. But out





of that, we're building a new hospital in Trenton, which is part of my riding, the Trenton Memorial Hospital. By the way, we also have clearance to go ahead and build a hospital in west Northumberland, probably located in Cobourg. This is the Northumberland Health Care Corp. It has had some difficulties, and I can tell you that the biggest difficulties came when the leader of the Liberal Party came to town.

1700

They came into Cobourg back in, I believe, late March or early April on a retreat. They had so many retreats last winter; I couldn't figure out what they were retreating from. But a couple of weeks prior to that retreat, the member for Thunder Bay-Atikokan came to town. I guess she was part of an advance team to check out what was going on there, and found out that things were really in pretty good shape. In spite of finding out that there was 70% funding for a new hospital and things were moving along quickly, maybe she didn't advise her leader very well. They still came to town and it seemed they were out to destroy what was being developed there.

Of course, I wasn't advised of this visit. If I had been, I would have had a parade for them and welcomed them to town. I'm concerned about their wandering all over Ontario and not being warmly received, and I could have looked after that for them. But I wasn't advised, and I understand there is a courtesy expected to notify the local member.

When I was in the riding of Hastings-Frontenac-Lennox and Addington with my task force on rural economic renewal--by the way, I am very honoured that the Premier appointed me to manage that task force. When we were there, the member for that area, who happens to be a member of the Liberal caucus, took great pains to tell the audience that my invitation to her to attend must be still in the mail. So I take for granted, if that came from the Liberal caucus, that they would expect that kind of invitation. Maybe the invitation from the Liberal leader is still in the mail and I'll get it. I know the mail is rather slow at times. But we had in fact alerted that member's staff. Obviously the problem is in her office. I guess her staff didn't bother to tell her the task force was coming. Probably that was why her nose was a little out of joint because of that visit.

What I'm coming around to is, with the entourage coming to town, it seemed very important to upset the community, and I can tell you that the leader of the Liberal Party indeed did that. He questioned the local people, questioned the local hospital board: Could they in fact raise the 30%? I can tell you that he left town leaving a very bad impression in west Northumberland, questioning that they might not be able to raise the 30%. I can assure you there is absolutely no question that raising that 30% is more than probable. Studies have been carried out, and there's absolutely no question that those dollars can be raised.

The time is slipping along very quickly. A little earlier, the leader of the third party was talking about home care and privatization. I think we should bring to his attention some things that have been happening with home care and privatization.

Private companies have delivered home care in Ontario since the early 1970s. When the NDP left power in 1995, almost 50% of all publicly funded homemaking services were being provided by for-profit agencies, as well as 13% of all publicly funded nursing visits. Not-for-profit and private agencies have an equal opportunity to compete for service contracts. Ontario has not lost a single existing provider of community services. We have gained a number of other new providers in the province, to the benefit of Ontario's citizens.

In addition, I think it's interesting to note, in case the leader of the third party is interested, that during their term there was an increase of some 34% in privatization. I find it rather surprising to hear him speaking a few minutes ago, so concerned about this. With that kind of activity and those kinds of things happening during their term, I'd think they must support privatization when so much of it was going on at that time. Certainly they were not doing much about it.

I've been speaking a bit about restructuring and the feds expecting restructuring in Ontario. I've talked quite a bit about the Health Services Restructuring Commission. Certainly we're working on some 20,000 new long-term-care beds. In the period 1985 to 1995, there wasn't one single long-term-care bed





created in Ontario, while at the same time the Liberal government from 1985 to 1990 closed a lot of beds. From 1990 to 1995, in that full 10-year period, some 10,000 beds were closed in Ontario, but not a single long-term-care bed was created to help with the closing of the acute care beds.

They talk federally about pharmacare; in other words, supplying pharmaceuticals to our seniors and to those who are on social assistance. That's what we already have in Ontario. We'd appreciate a little bit of support from the federal government. I think it's up to something like \$1.6 billion now that it's costing for that program. It started out around \$400 million. That would be \$0.4 billion. That was roughly in 1985. You can see how significantly it's gone up. We have a deduction for those who can afford it of \$100. I understand in Saskatchewan it was around an \$800 or \$900 deduction per person and it's now increasing to something like \$1,700 or \$1,800, in that neighbourhood. We have one of the most generous drug programs right across the nation.

We talk about primary health care. That's already been started in this province, and I would think the federal government would be able to recognize some of those things that we're doing.

We've also restructured home care with the CCACs and what they're doing to assist people going from hospital and being able to stay in their homes longer than they have been able to in the past.

I'm not saying the system is perfect. There are still some bugs to work out of it, but it has certainly come a very, very long way.

In closing, I just very enthusiastically support this resolution that was put forth by the Premier and will be coming up for a vote tomorrow, I believe, to encourage the federal government to give reasonable equitable funding to the province to support health care.

**The Acting Speaker (Mr Michael A. Brown):** I would remind members that we're speaking to Ms Lankin's amendment to Mrs McLeod's amendment to Mr Harris's motion.

**Mr Mario Sergio (York West):** Mr Speaker, I do thank you very much for allowing me this time and reminding the House about what we are really speaking about. I've been listening for the past couple of hours or so and I've heard everything except what's really for discussion in front of us here today. But then again, anything goes when it comes to bashing, criticizing or attacking, except speaking to the point to which we should be addressing ourselves.

First of all, with respect to the NDP amendment to the Liberal amendment to the motion of the Premier, Mr Harris, let me just go over the few amendments put out by the NDP. It has, I believe, four parts to it. I'd like to mention to the House that the first one says, "Let's ban Mr Klein's"--he's a Premier, I believe, somewhere out west, just a bit further west than Ontario; calling for stopping the privatization of the health care system. It's, what do we say, motherhood, fatherhood issues. We've been saying all along, "Well, Mr Harris, let's not play games with our health care system the way we know it, the way we have come to know it, not the way we're knowing it today under the Harris government." I think it's hard to disagree with the principle not to touch the health care system and not privatize it.

I think it would be very nice if once in a while we heard the Premier, their ministers or some members of the government saying, "We want to have something for the people in Ontario that reflects our views, something made in Ontario for the people of Ontario." I would support very much that we don't go that particular way.

1710

The second says, "a freeze on the delisting of health services." There again, it's very fine to say, "Let's not delist it," and it's hard to disagree because I think this would entitle the people of Ontario to receive every possible care that they are entitled to and care should be available when it's needed by anyone in Ontario.

The third one is to end the proliferation of private, for-profit long-term-care homes etc. Again, it's hard to disagree with that. It is something that we have been saying and fighting for in the House for many





years with respect to privatization and for-profit and the care that is given in those particular homes to our senior community in Ontario.

Of course, the fourth point in the NDP amendment is for tougher inspections within the system and stiffer penalties. Again, this must stem from the fact that lately in the House we have brought on many occasions too many incidents that are happening with respect to the health care system in those particular homes, especially the nursing homes and retirement homes as well. With respect to that, I believe that not only we Liberals, but the government side is jumping on the bandwagon and wants to introduce their own private member's bill or change the way the health care system is delivered in the nursing homes and retirement homes. That's fine.

But since it seems that it's a free-for-all in here, let me address for a moment both the intent and content of the motion by the Premier himself. We are all of a sudden perhaps now finally coming to realize that we don't have a Premier who leads. He has become a reactionary. Every time he hears a complaint he has to react. That's the way we are being governed nowadays in Ontario. Because of what happens, he says, "Well, let's do something about it." But it's not something positive that he does about it. It is not providing more health care, when people are screaming about the particular system we are inheriting under today's government. So he has retreated. He repudiates by attacking other levels of government, namely, the federal government. He has become a master in buck-passing, as we say, or blaming somebody else. I find that quite ironic, because in his own bill--and I would hope that we will have more time to debate that, because I will try and spend the few minutes that I have on the amendment by the third party. I hope that I can come back and have some more time, that we all have plenty of time, to address the emptiness of Mr Harris's motion. I will try to just attach a few words to that. At least I want to get it off my chest, because it is so ridiculous that we have the Premier of Ontario come into the House and do nothing but bash and attack the federal government without suggesting any positive solutions as to how to deal with the crisis that he himself and his government have created here in Ontario.

The only thing that he's doing--and I will go step by step on his own motion here--is bashing, and he's got a full bag of fed-bashing. He's blaming the Minister of Health, he's blaming the Prime Minister and he's blaming as well the finance minister for the cuts they have made. Now, does this remind us of something, going back to 1995, when the actual Premier, Mr Mike Harris, said prior to the election, "Not one penny will be cut from the health care system, and closing hospitals is not on my agenda"? I find it very distasteful that we have to deal with such a serious issue and we can only resort to accusing somebody else for our own failure, for the cuts that we have made in Ontario. I find it quite appalling that the previous speaker, the member for Northumberland, said, "The feds have balanced their books cutting health care." My goodness, if there are some people who should be complaining in the House or outside, it should be the people of Ontario, it should be the people in this House, saying: "Mr Harris, what the heck are you talking about? You have championed the causes for cutting, and the only way you managed to give your 30% tax cut was by cutting directly from the two major institutions, that is, health care and education." That's how he has accomplished those 30% tax cuts.

But he did not balance the books yet, so please, the Premier should not be attacking the Prime Minister, the Minister of Finance, the federal Minister of Health. At least they have balanced the books. At least they recognize that, yes, they have shortchanged the provinces on health care, but they have allowed money. What is sad is that of the money that has been allocated for health care spending in Ontario, our government, Mr Harris, has not spent those monies on the health care system. I find that very sad, because as of late, in the last federal budget, there was about \$1.7 billion allocated to the province of Ontario to be spent directly on health care. And what do we have here? On a daily basis, we have the Premier and other ministers travelling the province making all kinds of ritual announcements--one day in, one day out--and at the same time, they have over \$800 million sitting in the bank earning interest and they're not spending it on the health care system. I find that quite distasteful.

I want to speak on behalf of the people in the area that I represent. They are very hard-working people. Day in and day out, they work hard. They want to come home and find peace and contentment. When they need some assistance, they want to make sure it's there, because they are entitled to it, because they are working very hard, paying taxes, all kinds of taxes. A lot of them don't understand, unfortunately, and we shouldn't hold them responsible for not understanding, because that is why they elect us and





other people at other levels to speak on their behalf. When there is that particular need, it should be there.

The hard-working people I represent--and I would say that I speak for most people in Ontario, because I think we have a wonderful community of hard-working people all over the place--don't want to know if it is Mr Chrétien or Mr Harris or whose minister it is. It is a fact, and we know and they know that since 1995 we have been subject to too many cuts all over the place. They say, "But they were necessary." But they were not necessarily in the right place at the right time and in the right amount.

**Interjection:** And for the right people.

**Mr Sergio:** Yes, and of course for the right people. If I have the time, I will try to address the plight of the seniors who are in need. We have no idea how many thousands, perhaps hundreds of thousands, of seniors are living below the poverty line, and no one is speaking on their behalf.

**Interjection:** User fees.

**Mr Sergio:** "User fee" is a wonderful way of saying it's another form of tax.

What does the motion of the Premier really say? Absolutely nothing, because number 1 says, "Condemn the feds for what they have done, for the cuts."

I'm going clause-by-clause so at least the people who are listening and able to understand know what the heck we are really doing, what we are talking about and what the Premier has introduced here in the House.

1720

Number two, it's attacking directly and viciously the Minister of Finance, Paul Martin, for not giving enough money, attacking again.

Number three, "restore funding permanently": He more than anyone else should give back all the cuts he has made since 1995 to the health care system. Had he done that, we wouldn't be in the situation we are facing today with the generalities of the health care system, but mainly a couple of points: emergency rooms and cancer patients. I don't think that prior to 1995, considering the situation that we went through as well, we saw the flood of our people we had to send south of the border, spending American money and going to a different country to provide health care for those people. I don't think that is acceptable today and I don't think it was acceptable yesterday. Certainly I can't tell the Premier today that he is right when he says, "We want to ask the federal government to permanently fund the health care system in Ontario." They are saying, "Pay your fair share." Mr Premier, are you paying your fair share? Why are you closing so many hospitals? Why are the emergency rooms always full? Why do people have to go south of the border? So far there is absolutely nothing but emptiness in the motion by the Premier.

The last point: He is attacking the Minister of Health. You can't ask for co-operation when you have contempt, when you attack so blatantly another member at the federal level, especially the one you should be co-operating and working with, for a lack of sincerity in his commitment to the health care system or the Canada Health Act, whatever it may be--attacking the minister for vague words and idle rhetoric.

If I were the Minister of Health, I don't think I would really be too kind to the Premier of Ontario when he himself is not saying anything positive to solve the situation. As I was saying, the people I represent don't want to hear any head-bashing. They don't want to know who is right and who is wrong. They don't want to see any government spending millions of dollars to accuse and attack another level of government. This is where the Premier, when he comes into the House and faces the questions, should tell the people of Ontario the way it is, that since March 24 they have started this vicious campaign, spending taxpayers' dollars to the tune of, as somebody says, \$3 million, and as somebody else says, \$6 million, to tell the people, to tell the federal government: "You are not giving us enough money. We want more money."





The federal government says, "Look, you haven't even spent, you haven't even asked for all the money that we have allocated to you in Ontario for the health care system." Why are they holding on to \$700 million and still going to the expense, using taxpayers' dollars to attack the federal government? Indeed in situations like this, the only thing my people understand is that it makes them sick when they see one level of government attacking another one.

Briefly, let me tell you, because I've heard all kinds of rumblings of "Liberals this and Liberals that," what we would do as Liberals if we were in place to assume the leadership role the Premier has here today. Let me tell you what we would do instead of reading from six years' promotional advertising material or whatever. The people want to know today what the government is doing today. They are in power. He is the Premier. They control the funds, they control the money, and they have lots of money. They've got so much that they can't even spend the money the federal government has allocated to the Premier of Ontario, to the people of Ontario, to be spent on the health care system.

The people in my area--if I were allowed to I would say it in their own language so that perhaps they may understand better: Why is the Premier of Ontario not spending the money? The federal government is saying: "Look, it's here. It belongs to you to be spent on health care in Ontario." Why aren't you getting it? Why are you not spending it for the people in Ontario?

If they don't have enough, at least say, "Well, we have \$700 million that we could spend in many, many ways," and I don't have to tell you in how many ways we could spend it. But let me tell you what we would do as Liberals here in Ontario.

**Interjection:** Be honest with the people, first of all.

**Mr Sergio:** Absolutely. We are not limiting the blame only to Mr Harris and his government. I think there is a time and there's a place to attack other levels as well, but fairly and squarely. I think they both deserve to be criticized for failing to reach a consensus, to reach an agreement and deal directly with the problem the way we see it. I'm not letting my cousins up there in Ottawa escape free, you know. After all, yes, they have a responsibility as well, but they have a responsibility as well throughout Canada. When the feds are saying, "Look, we're balancing the books," and the Premier himself says, "Cut, cut cut"--

**Interjection:** He told them to cut.

**Mr Sergio:** Yes, he told them to cut, but at the same time he's giving them the money necessary to do the job that they're supposed to do on a daily basis.

We would, number one, stop pointing the finger at who's to blame. There is nothing to gain for the people of Ontario when day in and day out they say "Well, you're to blame"; "I'm to blame." They want a responsible government. They want a health care system that is there when they need it, that is available, that is accessible and that is affordable, as well.

*Interjections.*

**Mr Sergio:** Yes, absolutely. Oh yes, you're pushing a very sensitive nerve.

We would assume full responsibility as Liberals and we would deliver responsible service to the people of Ontario. Above all, we would stop paying with taxpayers' dollars to promote themselves, which I think was \$6 million, and \$100 million prior to the last election. I wonder how much service we could deliver to the people of Ontario. So I'm calling on the members and the Premier to stop passing the buck and deal with the issue.

**Mrs Brenda Elliott (Guelph-Wellington):** I'm very pleased to rise this afternoon and join in the debate on the government notice of motion 32, which is a resolution by our Premier. Just to remind those who are watching, the Legislative Assembly of the province of Ontario condemns the government of Canada for cutting \$4.2 billion annual base payments supporting CHSC, which is our health care social program





fund, and urges the government of Canada to repudiate a statement by the spokesperson for the federal finance minister that increasing health care funding would be just shovelling money into a hole that's going to open right back up again.

There are two more points on that resolution which I'll come to in short period of time, but I'm finding it interesting to hear the debates that have been going on in the House this afternoon. One colleague across the way was saying that it's inappropriate for us to criticize the federal government at all, as though we were doing something terrible. I was trying to imagine what it that would be like if I were a citizen watching at home who wasn't part of this Legislature, wondering if it would appear to them that in fact this was one government foolishly, perhaps for political purposes, heaving insults at another government. Would that be how it was perceived?

I would say to you and to my colleagues here in the House that the people in my riding of Guelph-Wellington wouldn't appreciate that in any way, shape or form. The people in my riding in Guelph-Wellington, and I think people all across the province, are looking for leadership from their elected member.

I'm thinking that the people in my riding, as in most ridings across this province, would say that health care is the number one priority, and I would actually agree with one of my colleagues who was speaking earlier about the importance of health care in our milieu of being a Canadian. I think for many people, a strong health care program is indicative of the kind of caring, warm, thoughtful society we have here in Canada. I think we pride ourselves on the kind of health care program that we have, we're very concerned that it's sustainable in the long term, and we all have come to recognize that given the demographic changes--the aging population, the growing population--that the pressures on health care are going to be enormous as time passes.

1730

I want to speak to a couple of quotes that passed my desk, which respond particularly to the speaker who came just before me. He indicated that somehow this is a problem our government is just making up, and I think he should be alerted to these two quotes.

"But I am part of the problem, not the solution. It was my government that diminished the size of transfer payments." That's a direct quote from Allan Rock in a speech to the 130th annual meeting of the Canadian Medical Association on August 20, 1997.

Here's a second quote from our federal Liberal health minister: "I will not stand here and tell you that the cuts in transfer payments that we made were insignificant. They were not. And I won't tell you that they have not had an impact. They have." Guess who? Again, Allan Rock, our federal Liberal Minister of Health, who has acknowledged that (a) he's made cuts, (b) they have been to the provinces, and (c) they have been very significant and detrimental. He has, by his own words, admitted he is guilty of cutting the transfer payments.

A whole series of numbers have been tossed out over the past few weeks: 6.3, 3.9, 4.2. To the ordinary voter, those are very large numbers. They all end in "billion," and so they're almost incomprehensible on that point. But what is really important to simply understand is that the federal Liberal government has cut transfer payments to the provinces by approximately 33%. This is an enormous cut in the face of governments who have been trying to balance their budgets and who recognize that health is a priority.

I said earlier that I was trying to imagine how I would feel if I weren't in this Legislature and was an ordinary citizen turning on the television, hearing the ads, reading the newspapers and seeing the two governments argue back and forth. Would I be thinking that this is a serious issue or just a bit of a cat fight between one government and another? This is what would make me understand that this is very serious: Aside from the fact that we're talking about very large numbers, 33% of the biggest transfer from one level of government to another, we are seeing premiers and health ministers of every political stripe, right across this country--Roy Romanow, an NDPer from Saskatchewan; Brian Tobin, a Liberal from Newfoundland--all saying the same thing to the federal Liberal government: "It is time to bring your money to the table. Yes, we'd be happy to talk about programs; yes, we all have ideas from our own



jurisdictions. But without base funding, it is very difficult for us to proceed." To see all these political leaders in health, as well as premiers, standing shoulder to shoulder to say the same thing and agree is very unusual. I think it speaks to the depth of concern that all of these leaders in their own provinces have about their priority program--health--and how difficult it is for them to be able to manage.

It is very important for all our constituents to understand that in our province the only government that has cut health care funding is the federal Liberal government. When we were elected in 1995, our health care budget in Ontario was \$17.4 billion. We have steadfastly added to that budget every single year to try to meet the pressures. We are now up to a little over \$20 billion, and we have committed to at least \$22.7 billion. By all predictions at this point, we are going to need more money and we're going to need it sooner, because we are listening and we know the challenges we have in this portfolio.

What I'm saying here is that we have a united concern across Canada, directed to the federal Liberal government. It's not just here in Ontario's Legislature. We've all recognized that health is a priority, that it's a growing priority and a problem, and that Ontario's commitment to improving and expanding our health care budget is unequivocal. We have been very steadfast in that.

The speakers before me have been talking about a number of different actions that have been taken. Because I represent the riding of Guelph-Wellington, I want to point out some of the things that have happened in my own riding, based on the principle that actions speak louder than words. In our party and in our government, we have undertaken a number of initiatives, whether you look at home care, pharmacare, restructuring, nurse practitioners or long-term care. We have been leaders in all of those programs, and we've taken very definitive actions, with extensive investments.

The question is, do those numbers actually translate into projects, into new programs in our own riding? I was trying to think about what has happened in Guelph-Wellington. My colleague Dr Galt referred to a new hospital being built in his riding that was promised under the Liberal government, not delivered; again promised under the NDP government, not delivered. The interesting thing is that that happened exactly the same way in my riding, and I'm very pleased to report that in my riding right now the Guelph General Hospital is being completely rebuilt and refurbished. That is a promise that has been ongoing and very controversial and upsetting in my riding for over a decade now. The St Joseph's long-term care hospital is now under construction. Again, promised by the Liberal government, no delivery; promised by the NDP government, no delivery. But Mike Harris, before he was even the Premier, came to town and said, "We're going to deliver." Hallmark of our government: We keep our promises. Guess what? Both are under construction, both being built, and I can tell you my constituents are very happy about that.

### *Interjections.*

**The Acting Speaker:** Order. I'm having a great deal of difficulty hearing the member from Guelph-Wellington. Members would know that only one member may speak at a time.

**Mrs Elliott:** Hospital restructuring and delivery on capital and infrastructure has been unequivocal in our riding, and it has been the Mike Harris government that has delivered, hands down.

I look at things like health centres. We've had a community health centre that has been delivering service to our community for several years now, and its mandate is to deliver health services to people who are hard to serve, primarily street people and people who have a lot of health challenges. We are going to now have a brand new community health centre that's going to be strategically placed right downtown, exactly where it should be. It's our government that is making this capital investment. The tenders have just been opened recently. Work is underway, and I think the total is something like \$6.3 million. The interesting thing about this project is that it's not going to be just an isolated community health centre. They're renovating an existing building down town, and they're going to have tenants come from all around the city delivering all sorts of different kinds of services so that in fact it will be a true community health centre in every sense of the word. We're very excited about that.

I mentioned the hospitals and nurse practitioners. Ours is the government which established legislation for nurse practitioners. We have pilot projects all across the province where nurse practitioners are now





taking leading roles. One was just announced, again at St Joseph's hospital in my riding, a nurse practitioner to deal primarily with geriatrics, something people are very excited about, because they do see this as a very practical solution for primary care reform.

Dialysis: I did a statement in the House the other day. People in my community always had to go to Kitchener-Waterloo, to Grand River, for dialysis for years and years and years. We now have a satellite project right in the city, right next door to our new hospital. It has been beautifully designed. It's actually designed a bit like a home; you go in and it's not hospital-like at all. This was actually as a result of a number of leaders in the community. Lisa Arntz, who's an interior designer, came and added her expertise to make this facility much more home-like for people who have to undergo dialysis three times a week, which is very stressful. Our government has made huge investments in dialysis units all across the province so people could get the service where they need it, when they need it, close to home. We have seen those practical results in Guelph-Wellington.

Alzheimer's was another one that came to mind. Recently there was an article in the paper recognizing Ken Murray. Ken is a local constituent and a philanthropist and community leader who has been instrumental in getting the Alzheimer movement underway. He was recently recognized for all of this work. Of course, it's our government that has the Alzheimer strategy underway with the Ministry of Health and the ministry responsible for seniors.

1740

What I'm saying is that when Allan Rock says, "I'm not going to give you money unless you give me plans," our government has had plans. We've had action underway. We've been making unprecedented investments in health care all along. It's the federal Liberal government that just doesn't get it, and everybody knows it. Not only that, but they've actually admitted it.

A recent newsletter came out in my riding from my federal member, also, interestingly, named Brenda. It had a whole section in it devoted to something called "tax credits." I've never heard of something like this--tax points. I thought, what is this all about? I don't know. The article was essentially saying that our province, along with others, has been given some tax points which should make up for this tremendous 33% reduction in CHST payments. So I did a little bit of homework on this and I found out that this whole idea of tax points actually originated in 1941 at a federal-provincial conference where Prime Minister Mackenzie King obtained the agreement of the provinces to cede their entire personal and corporate income tax bases to the federal government for a period of five years in order to finance the war effort. From that came something called a rental payment to key provinces. This was renegotiated several years later, in 1947, where the federal government wanted to extend those tax rental agreements. Ontario and Quebec at that time chose not to participate and chose to reintroduce their own personal and corporate income taxes. So--and this is the key--Quebec and Ontario received a credit of 5% of federal income taxes collected within their borders. This credit was then increased several times, but--and here's the key--it ended in 1962 when they were replaced by tax collection agreements under which all provinces except Quebec began to levy personal income taxes as a percentage of basic federal tax payments.

For the life of me I can't imagine why federal MPs across this province are trying to persuade our constituents, who know full well what's going on now between the federal government and all of the other provinces--why they would try to present pretty weak and mute arguments about something called tax points. Perhaps they thought if it was obscure enough, nobody would actually take the time to figure it out and know what was going on.

If any of my constituents are watching and wondering, "Well, Brenda, are you really telling us the whole goods?" the national accounts prepared by the federal government's own Statistics Canada include revenues that originated from the 1977 tax transfer as provincial revenue. They say this is the province's own source revenue. Their national accounts have a category that identifies current transfers that the province receives from the federal government. The tax transfer or tax point revenue is not included in this category.

This is a very common expression, but the bottom line is, these are big words trying to confuse ordinary





people. I came across a chart. These big words are trying to confuse people that the federal Liberal government is not living up to their promises. This is a graph of the money that the federal Liberal government has cut from the transfers to the provinces. I don't know if you can see it, but it's a big box and there's a big scoop right out of it, just like a great big ice cream scoop, a great big piece right out of it. It's about a third of it gone. That's the money that has not been given to the provinces by the federal government. In fact, it's over \$10 billion. Ten billion dollars has to be thought of in this way: Right now Ontario spends a little over \$20 billion for health care; \$10 billion would be half that budget over again. That is an extraordinary amount of money that could be invested in very specific programs like dialysis, like Alzheimer's that I mentioned, like more hospitals, more nurse practitioners. It just goes on and on. Health care, hip and knee replacements, all of these things, our people want to know about.

Our Minister of Health was very diligent when she recognized that Allan Rock was asking her, "Show me the plan before I show you the money." She got some notes together and outlined very clearly what we've been undertaking here in Ontario. It's extraordinary:

In primary care reform, we've got 200 doctors in pilot projects offering 24-hour, seven-day access.

I mentioned the nurse practitioners earlier.

Three drug programs: These are marvellous programs. Some 44 million prescriptions were filled in 1998-99 under the ODB plan. As my colleague mentioned earlier, we have a minimum cost of \$100 on that program, and in most other jurisdictions it's at least nine or 10 times that. We have the Trillium drug program. The expenditures in that program alone were \$45 million in one year, delivering very expensive drugs for people who have serious illnesses like cancer or HIV, to over 100,000 people.

Home care has been a wonderful success in my riding. We were underfunded in Guelph-Wellington for many years. When our government came to power, I was very pleased to see more equitable funding being distributed all across the province. But we've increased that program, in addition to making it more equitable, by 43%.

In closing, I just want to say that people in Ontario who are wondering whether or not Ontario being cross to the federal government is a fair thing to do can be reassured that it is very fair. The numbers speak for themselves. Allan Rock, the federal health minister, has acknowledged that he has cut the funding significantly. The challenge for us is to find ways to cope with this, and we are taking action clearly in so many different fields.

But the bottom line is, money has to come. These are priority programs, particularly at a time when we're talking of a federal Liberal government which has a huge surplus, and they got that surplus on the back of each and every province as they cut transfer payments. It's challenging when it's a program like health.

Lastly, I'm going to say that in my riding of Guelph-Wellington people have been so concerned about this that they are starting to sign petitions asking the federal government to share 50-50, asking them to contribute more than 11 cents, which is unconscionable, asking them not to create new health programs before properly funding existing programs.

I'm very pleased to add my voice to this debate today. I think it's about time that our citizens stood up beside us and asked the federal government to bring the fair money to the table for all citizens so that we can deliver better programs across Ontario.

**Mr Michael Bryant (St Paul's):** I'm going to reserve most of my comments this afternoon to talk about the poor cousin of our broken health care system, our mental health care system, in particular a nightmare, a tragedy that has visited a family that lives in my riding and a community in which a family member of theirs lives.

First, a couple of comments, because I can't let this debate go by without saying that in my riding we had a hospital close. The Hillcrest hospital, sometimes called the Toronto Rehabilitation Institute, is slated for closure. Now, let's be clear here: Dalton McGuinty is righter than right but neither left nor right when



he says it's time to stop fighting over health care and to fight for health care.

That said, let there be no mistake: It's not the federal government, it's not the federal health minister and it's not the Prime Minister who closed Hillcrest hospital in the riding of St Paul's. It's Mike Harris who closed that hospital. The hospital restructuring commission made a decision for which this government must be held to account. The people in St Paul's, in June, voiced their opinion as to who is cutting in health care. I can tell you, you can spend on advertising until you're blue in the face, government members, you can spend all you want, but you will never convince the people of Ontario that it is not you, the government, that has cut health care, as opposed to another government.

1750

Another thing I'd like to say is that I was elected here to speak to provincial issues in a provincial House as one of 103 provincial MPPs, and this government would like to spend its time talking about another House. Their response to the health care crisis is: "Look over there. For goodness' sake, don't look there." This government--

*Interjections.*

**Mr Bryant:** Mr Speaker, I can't hear myself over the cacophony.

**The Acting Speaker:** The member for St Paul's is right. There is too much noise. I'm having a great deal of difficulty hearing him. If you have conversations that don't relate to this debate, please take them outside. The member for St Paul's has the floor.

**Mr Bryant:** Having canvassed those first two points, I want to speak to this issue of our mental health care system.

There is a family in my riding and they've asked that I mention their name. It's the Whitmore family. Ian Whitmore's brother suffers from schizophrenia and has been convicted for a violent offence. If there's anybody in this province who needs the assistance of government, it is somebody who is afflicted with schizophrenia. Necessarily, in a rational society with a Criminal Code and rational laws, we anticipate and expect people to obey those laws and to be responsible for themselves, but as everybody understands, those who have schizophrenia aren't living in the same universe as us when they're not on their medication. Those who have a history of violence are the very people our government and our society need to assist, not only for them so they don't hurt themselves but so they don't hurt members of our community. It turns out that this category of people, schizophrenics with a history of violence, is the very group of people for which there's absolutely no assistance provided within our health care system. I'll walk everybody through this, and we'll have to follow the bouncing ball as we're bounced from ministry to ministry.

In a nutshell, if you are a schizophrenic, then you are to go to a mental health facility, but the mental health facility won't take you because you have a history of violence, so you're sent over to a supportive housing facility which has no supervision whatsoever. In the meantime, there's no way for these people to comply with their sentencing and parole orders and to take their medication, so they go back to the hospital, but the hospital won't admit them because they have a violent history, and on it goes.

Of course it's a nightmare, and this family is living this nightmare. We all know it's a nightmare waiting to happen. So what's our public health care system doing about these people? They're doing nothing.

As a final addendum--and I want to get to the case, but I want to say this--I think we all agree in this House that something has to be done to our mental health laws. This government, by its own admission, has said that amendments have to be made. Nonetheless, notwithstanding that admission, this government decided to pass an act which intended to--and unfortunately has had no effect--sweep the mentally ill off the streets under the squeegee bill. That's the effect. Those who are aggressively panhandling--and we all know that often the mentally ill fall into that category, at least according to the Golden report. Those people need mental health treatment and facilities, but instead of doing that first before bringing in the squeegee and panhandling bill, this government decided to bring in the bill first,





by its own admission, sweeping these people off the streets and throwing them into jail.

**Mr Galt:** On a point of order, Mr Speaker: I believe the debate is on the resolution that the Premier put forward, not the squeegee bill. The safe streets bill has been passed. I think that's over and done with. What we're debating today is the resolution brought forward by the Premier of Ontario.

**The Acting Speaker:** An interesting observation.

The member for St Paul's.

**Mr Bryant:** This is a case in point: You just don't get it. You don't see the connection between the failure of our public health care system and those who need assistance, those who are sick and those who are on the streets. But then again you wouldn't know anything about what's happening on the streets of Toronto other than what you read in your speaking notes.

I'd like to get back to this serious issue and off the efforts of this government to distract. I can assure you that the Whitmore family will not appreciate the fact that in the midst of having their story told to this province, this government has decided to play politics. You should be ashamed of yourself for that point of order.

Scott Whitmore was released from the Millbrook Correctional Services Centre on August 24, 1999. Prior to his release, a letter was sent to the Minister of Correctional Services, Mr Sampson. An attempt was made, knowing he had been convicted of a violent offence and was going to be released, to arrange for a place for him to go. They were told, "This is not a correctional issue; you're going to have to talk to the Ministry of Health."

So let's follow the bouncing ball. Over we went to the Ministry of Health. There we were told: "Yes, there are homes for special care, mental health facilities. But because he has a history of violence, he will not be admitted to those facilities. And while there are a few facilities that could treat him, there's no room at the inn. Those beds are full, so there's nowhere for him to go." So the Ministry of Health told this family and told our office, "Off you go to the Ministry of Housing."

The Ministry of Housing said, "You can go to a halfway house." But of course there are no more halfway houses. Moreover, even if there was a facility for him, he would have to go to supportive housing, notwithstanding the fact that in terms of supervision the supportive housing facilities have a recreation worker and a cook. When this person isn't taking his medication, by the family's own admission and by his own admission, there is a history of and a tendency to violence.

So where does he go in our public health care system? This is Ontario. We're told by this government that we are living in times of great prosperity. So one would think that now is a time when our health care system would be able to help those who can't help themselves, help this family living through their nightmare and help the community in which this man is living.

We've had so many inquests calling for changes that I can't begin, in my allocated time, to go through all of them. The Zachary Antidormi inquest of September 1999 said that the Ministry of Health should study existing legislation, including the Health Care Consent Act, to consider whether legislative changes are needed, and of course they are. But we've known that for years. This is one of a long line of coroner's inquest findings.

Then it's time for him to get treatment, and he needs to have his OHIP card. But when you're incarcerated you lose your OHIP card. But because he's schizophrenic, he's not capable of going back and getting an OHIP card. So yet again he falls between the cracks because there are not facilities to assist him in getting that card.

Recently it's been reported that this man has been slipping into a worse mental state. He's not taking his medication. He has tried to check himself into a mental health facility, but there's no room in the inn at the hospital he went to. He was not admitted. He was told that all beds were full and that there are different admission procedures for him, and again he just fell between the cracks.





Mr Speaker, you're standing.

**The Acting Speaker:** It being 6 of the clock, this House stands adjourned until 6:45.

*The House adjourned at 1800.*

*Evening meeting reported in volume B.*



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# Ontario Hansard

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1st session, 37th Parliament | 1<sup>re</sup> session, 37<sup>e</sup> législature

Mon 10 Apr 2000 / Lun 10 avr 2000

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# Ontario Hansard

No. 39 [C]

**1st session, 37th Parliament | 1<sup>re</sup> session, 37<sup>e</sup> législature****Mon 10 Apr 2000 / Lun 10 avr 2000***The House met at 1845.*

## ORDERS OF THE DAY

### HEALTH CARE FUNDING

Resuming the debate adjourned on April 6, 2000, on the amendment to the amendment to the motion by Mr Harris relating to health care funding.

**Mr Michael Bryant (St Paul's):** I was discussing a tragic case and again I want to put it in context. A government member stood up and said: "Why are we talking about the mental health care system? Why are we talking about sweeping the sick from our streets when we're supposed to be debating this resolution?" That's the very point. This government doesn't get it, that in fact this is an integral part about our public health care system and it's turned out to be the poor cousin in a bankrupt health care system. While the provincial government and the federal government fight over who's to blame, in the meantime the people of Ontario are watching millions of dollars being spent on advertising that could be devoted to our health care system.

The victims of this are the families, the patients and the communities in which, for example, we get this story, which comes out of the riding of St Paul's, of the Whitmore family and a schizophrenic with violent tendencies who has nowhere to go in our public health care system. Those diagnosed with schizophrenia and having been in a correctional facility for crimes relating to their illness have no place to go. There's a gap in our public health care system. You can try and blame Ottawa, and Ottawa can complain about what's happening here in Queen's Park, but the point is that there is a gap, and it's this family, the Whitmores, and it's the community in which this man suffering from schizophrenia lives that are at risk.

He was released from jail in August 1999, homeless, without rehabilitation, without supervision, without medication and without the means to fulfill the very sentence that he was given; that is, to take his meds. Everybody who works as an MPP knows that because probably in their community they have come across a family who has a member who suffers from schizophrenia. They know that the key to this is to take the medication.

Well, he couldn't take the medication because he couldn't afford to take the medication. OHIP didn't cover the medication, but even those services that OHIP did cover--he didn't have his OHIP card because he had been in prison, and because he was schizophrenic and dysfunctional, he couldn't go and get his OHIP card. The use of the medication is obviously critical for him to operate as a healthy citizen within his community. He's been unable to find that facility because mental health facilities in Ontario can't take people with a history of violence. These are the people who need the most treatment, who pose the greatest danger to themselves and to others, and yet there's nowhere for them to go.

I've told this House of our efforts in contacting a number of agencies. We wrote the Minister of Correctional Services and he sent us to the Ministry of Health. We wrote the Minister of Health and this





is the letter, and I want to repeat it in this House, that I wrote on behalf of the constituent, Mr Whitmore. I wrote the minister on March 6:

"Specifically, his concern," I say of Mr Whitmore, "is on behalf of his brother ... who suffers from schizophrenia and anti-social behaviour. He was released from Millbrook Correctional Centre on August 24, 1999, without any form of supervised housing provided for him and is now living without supervision. He's unable to care for himself; there is no one there to prepare his meals or ensure that he is taking his medication, which keeps him stable.

"Within Ontario's health care system there is no assistance provided to schizophrenics of a violent nature, such as Scott Whitmore. The importance of providing mental health services to someone like this cannot be understated. This is a disaster waiting to happen."

As I wrote, "I have contacted your ministry"--this is to the Minister of Health--"on numerous occasions and have ... been given the same response: It is a housing issue which can be dealt with through the Ministry of Municipal Affairs and Housing." As I write, "It is time for you, Minister of Health, to take responsibility for those who require treatment for mental health disabilities."

We also contacted the parole officer, who said there's nothing he can do to ensure that this man takes his medication. You can write it in the sentencing order. It is in the sentencing order, and that's right, but that's as far as it goes.

As I said, this man is slipping into a worse mental state. He tried to check himself into a mental health care facility and was turned away. No room at the inn.

We have also contacted officials to try and take advantage of one option, which is unfortunately again not available because of his history of violence, to receive counselling as a day patient where he would not require a bed, but instead only be in for counselling during the day and return home in the evening. He has attempted to check himself into a facility of this type, but again he has been told that there is no room at the inn.

We desperately need new legislation. We desperately need the appropriate funding in order to serve people such as this. We've contacted every single ministry official that you can imagine on this issue, in addition to a number of organizations which tell us, unfortunately, that this is not an anomalous case. We spoke with the Schizophrenia Society of Ontario, the Canadian Mental Health Association, New Dimensions in Community Living and the former Clarke Institute on Queen St.

These organizations tell us that this is not anomalous, that we continue to have a situation where our mental health care is the afterthought to our public health care system. This debate about tax points which nobody understands, this debate over the jargon, "primary health care reform," which nobody understands--these are important debates, of course, and we are to have them in this House. We are here to do the business of the people. But in the meantime, the money that is being spent on advertising by both first ministers and by both ministries of health could be providing for medication, for supervision, for housing, for people like Scott Whitmore.

Instead, we've got an institutional gap. It's not as if we're just missing some funds for this person; there is nowhere for this person to go. One facility says, "Go to the other facility," the other ministry says, "Go to this ministry," and everybody continues to pass the buck.

From those who have expressed concern in the Millbrook Correctional Centre, to those who expressed concern in the Ministry of Correctional Services, to the Minister of Health, they are all aware of the problem. We are all aware of the problem. Members sitting here are all aware of the problem. But what are we doing about it?

Well, what we're doing about it is debating over who is to blame with respect to the state of our public health care system. It doesn't make sense. The people in my riding and, I think, the people of Ontario have had enough of governments playing politics over our public health care system. We've had election after election, debate after debate over its state. It's supposed to be this great Canadian tradition and icon





of our public health care system, yet we're seeing it transform into the equivalent of an old Soviet Union bureaucracy, full of nightmares, full of gaps, institutional and otherwise. So what do we do?

I commit myself here to continue to assist the Whitmore family. I won't give up. I know that those families who share this similar nightmare don't want their members of provincial parliament to give up. I look forward to a response from the Minister of Health. I sent the letter on March 6, in addition to repeated efforts previously to contact the minister. I know we're going to be seeing some legislation in this area, and I look forward to seeing and being assured and hopefully convinced during debate--yes, debate--that in fact we're not just going to change the laws without having the facilities in place to ensure that there's somewhere for these people to go.

There's no point in simply bouncing Scott Whitmore from department to department or, under this new legislation, from penal institution to penal institution. These people need care. This is the place for affirmative government that takes a community of private sector combined with the public sector. Here's a moment for the government to do something. We all need to remind ourselves of the effect of our bankrupt public health care system, and here is one sad story that comes out of it.

**The Speaker (Hon Gary Carr):** Further debate?

**Ms Marilyn Churley (Broadview-Greenwood):** Mr Speaker, I'm not sure if, in terms of rotation, I'm supposed to be the one up. I am, am I? OK. Thank you. Sometimes, because of the skipping, we get some wrong advice from time to time, don't we, Todd? That's in the record now. So here I am, still writing my speech Todd.

I'm pleased to have this opportunity to speak to Ms Lankin, who's the member for Beaches-East York, the NDP health critic, and, I believe to her amendment to the Liberal amendment to the resolution on health care put forward by the Premier.

I welcome this opportunity to speak to this, although I certainly recognize that perhaps the sole purpose of the resolution put forward by Mr Harris is to embarrass the Liberals, both in Ottawa and here in this House. I welcome the opportunity because it gives us here in the Legislature the opportunity to have a much-needed serious debate about what is happening to health care, not only in Ontario but across our nation. There is absolutely no doubt that people right across the nation, as well as here in Ontario, are extremely concerned about the apparent move--and it certainly is happening in Alberta and it's happening by stealth here in Ontario--to privatization of health care, the two-tier system, and they have a right to be concerned.

What I'm hearing is that the public is getting very tired of the partisan nature of the debate. I know it's very hard for us in this House not to get partisan. I've observed in the debate so far that people stand up and say, "I'm not going to get partisan because this is too important a debate," and of course we all do. We all fall into that, accusing each other. The Tories like to pretend that no other government that ever did anything right or progressive on health care existed before. We all know that isn't true. We all tend to yell at each other and go after each other, but the public, our constituents, don't want to see us do that. They are concerned about what is happening to health care.

We have a resolution before us that attacks the Liberals in Ottawa, and I'm very pleased that the amendment to the amendment from Ms Lankin, the member for Beaches-East York, put forward what I suppose is really a non-partisan amendment that everybody in this House should support, and I urge every member to support it. It doesn't mention specifically a level of government. It just talks about the four principles of the health care system that we need to affirm in this House as of now to give all of our constituents, no matter what party we represent in our own ridings, comfort that there is a full commitment from all of us to uphold these principles. I'm going to read that amendment again:

"And that the government of Ontario adopts the following four principles: a ban on Ralph Klein-style private, for-profit hospitals; a freeze on the delisting of health services; an end to the proliferation of private, for-profit long-term care and home care and a tougher inspection system and stiffer penalties for independent health facilities."



The constituents in all our ridings recently have been subjected to a series of ads. Before the federal Liberal budget we were subjected to a multi-million-dollar ad from the Tories here in Ontario urging the Liberal government in Ottawa to give us tax cuts. There was a lot of pressure from the Reform Party--I forget what they are actually called now--and generally from the right wing across the land to give us that tax cut. The Tory government here put out a very effective ad, and spent millions of dollars doing so, urging the government to cut taxes. The Liberal government in Ottawa did what they were asked to do: They gave those tax cuts.

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I did not hear, and I wish that we had heard, the Premier of the province at that time before the budget. I would expect that members of his own caucus would have liked to see, if they were going to spend money on ads, an ad urging the federal Liberal government, as they have done in this resolution before us, to provide more funding for health care in Ontario, and that wasn't done. Then what did we see after the federal Liberal budget came out? Indeed yes, the tax cut they had campaigned for was there. In fact, we saw a \$4.5-billion cut from health care funding. Then in this year's budget, for every dollar in tax cuts, the federal Liberals found only two cents for health care. The Liberals gave \$58 billion for tax cuts and \$1.25 billion for Canadians' top priority: health care. The Liberals in Ottawa were under a lot of pressure from a lot of people, including this Conservative government, to give us that tax cut. But then, after we received the tax cut, we started to hear from the Conservative government complaining about the fact, quite rightly--I totally agree with the sentiment here--that the Liberals didn't restore the funding to health care.

**Interjection:** Well, not quite.

**Ms Churley:** No, they didn't restore it at all. When you lo'ok at inflation and the aging population and the growth in population, it's not a restoration at all. It would have been of benefit to all of us here in Ontario had the Tories, before the Liberal budget, campaigned for the restoration of the cuts to health care.

The Tories don't talk about it, but I certainly still feel the pain of it after all these years: When the NDP was in government--and Mr Speaker, you'll remember this very well because you sat over here at the time--I do recall members, including the Premier, who was then the leader of his party, accusing the NDP and Bob Rae, the Premier at the time, and our health minister of whining when we complained when Mr Mulroney started cutting the so-called cap, a cap on the cap, for social services and for health care. Mr Mulroney at the time started that trend of cutting the transfer payments to the provinces, particularly the three largest provinces. We were accused at the time. We got no support from the Tories who were sitting there to help us lobby the then Conservative government, as they now accuse the Liberals sitting here of being weak on lobbying and speaking out against what the federal Liberals do. They did the same thing when they were in the third party here when we needed their voice and their support, especially during the deep recession that we were in.

That's what I find so regrettable about this whole debate and what is so regrettable about the tone and the nature of this place from time to time. I think we would all agree that there are times in this Legislature when it's not good enough for a Tory member to stand up and crow and get lots of loud applause and smiles and laughter from her own caucus about something nice that happened in her riding and that the Liberals didn't do and the NDP didn't do, but, by God, the Tories did it. That's not what this debate is all about. I could complain about the Riverdale Hospital almost being shut down in my riding and the results, the mess it's in now in terms of the negotiations about where to go from here. I could complain about a lot of things. I could stand here and talk about a lot of good, progressive work that we did when we were in government, and I know my colleague Ms Lankin did that. I urge people to read the speech that the member for Beaches-East York gave, because as a former Minister of Health she has a very good handle on what we did when we were in government and the reforms we had started. It isn't correct for the Tories to say that nothing was going on until they got into government. That isn't true facts, and that is the reality. I think my colleague did a very good job of pointing out the work we did and some of the misinformation that is continually put forward by members of the Tory caucus about what we did and didn't do. We made a lot of good reforms, and that's outlined in her speech.





I want to talk about where we need to go from here and how we can all start working together to make it happen. That is what people want, and generally there is now a consensus on where we need to go. The buzz words are "primary care reform." By now I think most people in the population, and certainly all of us here, understand what that means. It's not a new idea; it has been around for some time.

Several years ago I worked in the South Riverdale Community Health Centre. It was many years ago. I worked with people like Michael Rachlis, a doctor there at the time, Phillip Berger, Debbie Copes, Maryanne Cheatham and others. Maryanne Cheatham was a nurse practitioner and still is to this day. They were in the forefront of reform and I was, in the sense that I had the opportunity to work for a while in one of the very first community health centres. That was, and still is today, a model of what we are talking about here.

We had doctors, nurse practitioners, nutritionists, an environmental health officer and others all working together. Quite often, when patients came in, they would see the nurse practitioner first. If they needed to see a doctor, they would; if they didn't, then that was a saving right off the bat, and they got the care and attention they needed. Overall, it was not only a saving for the taxpayers--I prefer to call us citizens--for the citizens of Ontario, but it served the patients well.

We all know we are at a crossroads in our health care system. It is an extremely serious debate that we are having here, and I fear that we are not taking it seriously enough. It is an opportunity for all of us to engage in real dialogue about where our differences are, where we can agree and what we can do together to make it happen, working with the federal government. I fear that the resolution before us is just all about blame. We now have to go beyond blame and get on with tackling a very difficult problem. But it really isn't all that difficult, because the groundwork has already been laid. It's just that we need some real leadership, both from the federal government and from the Tory government here in Ontario.

I think it's time for the blaming to stop and for the federal Liberals to get off their high horse and stop the punishing tone of, "We won't give you extra money until we are guaranteed certain things." It's time for the Tory government here in Ontario to say, "We want to move forward; here are some steps we want to take," and sit down with the federal government and come up with a plan. That is what the people of Ontario want, because they're frightened. As the population ages, and I'm in that category, I'm frightened, because we see ourselves going down that two-tier road more and more. We continually hear the threats from the Tories here in Ontario, "If the Liberals in Ottawa don't give us this funding, then we're going to have to de-list all kinds of services." We know what de-listing means. It's more services that people are going to have to pay for.

I very much want to see the politics of blame stop around this issue. Perhaps it's too much to ask, but I would ask that we all attempt to have the serious debate we need to have and talk in a constructive way about where we go from here.

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I have a very strong interest in determinants of health, that is, health prevention. I'm going to give you an example. I suppose it's one of my hobbyhorses, and we don't talk about it very much here. As we know, there are all kinds of health determinants, and people have spoken to it. It's around housing and having enough money to live on so you can eat nutritional meals and have good dental care, good community health and all that kind of stuff.

I want to talk briefly about primary prevention of cancer, because we know that we have an epidemic of cancer right now. The focus is very much on finding a cure, which is fine, but there is all kinds of good work.

In March 1995, when Ruth Grier was Minister of Health, and as you know, she had been Minister of the Environment, she brought the two together and commissioned a report from some very good experts in various fields who wrote a report on things that we can do, mostly in our lifestyles, but with recommendations for government action. Several years ago, I put forward a resolution, which passed unanimously in this House. It just took one piece of this report on cancer prevention, and it was the environmental aspect of that.





There is growing evidence that there are all kinds of pollutants in our environment, in our food, in our water and in the air we breathe that are leading to cancer. We are seeing certain kinds of cancer more and more among young people. We're seeing a sharp increase in breast cancer in women and testicular cancer and prostate cancer in men. There is growing evidence that some cancer is caused by environmental factors.

The good news is that there is actually something we can do about it; the bad news is that we're not. It's hardly being talked about, but I can assure you that there is a very active group of people in our communities across Ontario who are working hard, still, to get government's attention and to bring forward some of these recommendations.

My recommendation was specific to phasing out or completely getting rid of known carcinogens or suspected carcinogens that lead to cancer. That resolution was passed in this House unilaterally by everybody. I almost said "unilaterally"; that was a slip. It was passed by everybody in this House, and there has been no action on it to date. That in itself could make a big difference in the future in terms of the number of people who end up with cancer, and not just elderly people but more and more children are getting cancer. A very good friend of mine's young son was recently diagnosed with cancer, and it's agonizing to watch that family try to cope with the horrible aftermath of that and the treatments and the fears.

That's just one aspect of the kinds of things that we have to be paying attention to. The road map has been drawn for us in all of these areas. So when we have this debate about where we go with health care, we need to affirm our commitment to these four principles within the amendment that our caucus made, and we need to affirm our commitment to looking at health determinants. We need to quickly bring in primary health care. I know it's tough. It can be tough to negotiate with doctors. I know when we were in government we put a cap on the salaries; it was very tough. This government took it off. But we need at this time to sit down and make that commitment and make it happen. The baby steps the government is now taking are not good enough. If we don't do something quickly--and that's why people are so worried and so concerned and so scared. They're hearing a lot of talk and they're hearing a lot of argument and blaming, but they're not hearing people talk about implementing the solutions that are already there.

Earlier today I felt a little sick listening to some of the debate, frankly, because I thought that the level of this discourse, this discussion, given the seriousness of the debate at this time, would warrant more serious commentary. I will end by saying that I very much look forward to hearing that discourse happen.

**Mr Wayne Wettlaufer (Kitchener Centre):** I welcome getting an opportunity to speak to this resolution, but it's also of concern. It's a concern that we've gotten to this point at all that we have to bring forward a resolution to ask the federal government to pony up. My recollection is from the 1960s, when I was a little younger than I am today, and the discussion came up about a national medicare program, that the federal government was going to contribute 50% of the total cost of the medicare program. Over the years, that has been reduced unilaterally by the federal government--no discussion with the provinces such that this year there will be an 11% contribution by the federal government to the total cost of medicare in this country. Let me see now, 11%: That takes the federal contribution to the national medicare program in this country from January 1 to about February 9, 2000. In this province, Ontario, the taxpayers pony up for the difference from February 10 until December 31 of this year.

In my riding this was foreseen by some very active individuals who took a leadership role, and they have done an awful lot in raising funds and contributing funds--people like the Hallman family and the Voisin family, who have been very generous. Frank and Gladys Voisin raised their family and taught their children that this was the way to get along in life, as did Lyle Hallman and his late son, Peter, who have done so much to contribute to the well-being of our community, and not just in other areas but also in the health care field, directly aiding the establishment of divisions within the hospitals, aiding in the construction of buildings, raising money for that. I give them credit for the leadership roles they showed.

We have an obligation. The people of this country expect the federal government to take a leadership role as well. We asked the Prime Minister, the provinces asked the Prime Minister, in February, before the advent of the federal budget, to please sit down, hold a first ministers' conference and discuss the



future of health care in this country. What did the Prime Minister do? His response was to ignore that request, suggesting in its place, after the federal budget, that the provincial health ministers meet.

The provincial health ministers met. The federal health minister had no mandate to make recommendations, he did not come with a health care plan and he could not make any decisions. He did not have the authority to make any decisions. The provincial health ministers are left wondering why there was a health ministers' conference. The leader of the third party, Mr Hampton, and the Premier of this province signed a letter requesting more substance from the federal government. Where was the leadership of the opposition party, the Liberal Party?

**Ms Marilyn Mushinski (Scarborough Centre):** There is none.

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**Mr Wettlaufer:** That's right, there is none. Where was Mr McGuinty? He refused to sign the letter. What kind of leadership is that? Is that because he's a Liberal? I believe it's because he's a Liberal.

**Mr Gilles Bisson (Timmins-James Bay):** I think so too.

**Mr Wettlaufer:** I say to my friend the member for Timmins-James Bay, M. Bisson, who says he thinks so too, I agree; no doubt about it.

We were very disappointed that the Prime Minister would not come to the table. He thinks it's all right that the federal government will pass laws, that they will pass regulations about the governance of the Canada Health Act. The federal government will pass these regulations; they will say how it's going to be run, but they will not come to the table. If you're going to pass the rules, you have to be a player.

Of course, we can question why the Prime Minister doesn't want to come to the table. Is it because he hasn't had any ownership, he doesn't want any ownership in the health care question? He doesn't want his government to be held accountable for the problems in the health care field? Why is that? Is it possible that he's looking at an election and he knows that the health care question is the number one priority of people in Canada today--not just in Ontario but in the whole country? Yes, I think that could be a reason. I'm speculating, mind you, but yes.

I'm embarrassed, as a Canadian citizen, to have a Prime Minister who lacks leadership in this area, the most important issue facing Canadians today. Yes, prior to the budget we did ask the federal government to come to the table with tax reductions. Yes, we did, as did the people around this country. They wanted tax reductions because they knew that would boost the economy. They knew that. But the people of this country also wanted more money from the federal government in health care. What did the federal government do? In the discussions leading up to the budget in February, what did they do? They started talking about a national child care program--and I'm not going to criticize a child care program; I won't do that. However, they were floating this trial balloon that they didn't know the cost of. On one hand they would say it was \$14 billion a year; on another hand they would say it's \$20 billion a year. Then it was \$12 billion a year. They had all kinds of money to consider for a national child care program, but all they could cough up for health care was \$2.5 billion. They have shortchanged the provinces by \$6.2 billion from 1994-95. Sure, they gave us back \$2 billion in the last fiscal year and all of the money we're getting in the province of Ontario is going to go into health care over a three-year period, as was promised. It will all be going back into health care. But the provinces of Canada are still shortchanged \$4.2 billion by the federal government, which claims it's doing everything it can for health care.

What is the province doing for health care? We have announced \$1.2 billion in the last two years for long-term care, to create 20,000 additional long-term-care spaces. Now, of that, 6,700 have been awarded and there will be additional ones awarded in the near future. Long-term-care beds hadn't been announced in 10 years prior to our government announcing them. The federal government says, "Oh yeah, we have to have more long-term care facilities." Then how about some contribution for it?

We've established 43 community care access centres in the last four years across the province to allow services to be delivered closer to home for Ontario citizens.





Home care: The federal government talks about home care. I don't see any strategy from the federal government. However, the Ontario Ministry of Health is currently spending \$1.5 billion annually on home care and community care services. From 1994-95 to the current fiscal year, 1999-2000, funding for community services increased by 49%. In-home services funding increased by 56%. We provide the most generous level of home care in Canada, at \$115 per capita.

Two years ago, the Ministry of Health and Long-Term Care began investing over half a billion dollars over a six-year period to expand and enhance community services. These in-home community services consist of in-home nursing, therapy, homemaking, supportive housing, attendant outreach and services for individuals with physical disabilities.

We aren't the only province doing it. We are taking credit for the investments we've made in Ontario, but other provinces are also making investments. Some of the provinces are really suffering. We've increased spending by \$3.5 billion in health care in four years. Other provinces have increased their investments as well, but they don't have the economy that we have in Ontario. As a result, they are strapped financially. We are fortunate in this province. We are making the investments and we will make a further 20% in investments over and above the present level over the next four years.

Yes, we can stand here and look for congratulations or we can indulge in some self-congratulation, but that's not what we're all about. We want to manage the health care system to the benefit of the average Ontario citizen. The federal government wants to take credit, but they won't put any strategy into it and they won't put any money into it.

**Mr Rick Bartolucci (Sudbury):** Wayne, do you have a plan?

**Mr Wettlaufer:** It's very interesting over here. They member from Sudbury asks, do we have a plan? What is the federal government's plan? We have asked the federal government to come forward with a plan, we have asked the federal government to come forward with money, and the federal government can't come forward at all. It's pretty evident, with the money that has been going into the Ontario drug benefit, into long-term care, into MRIs around this province, into cancer care, into cardiac care, facilities which weren't provided by those other governments, that we do have a plan.

I just want to talk about the Ontario drug benefit for a moment, if I may. The Ontario drug benefit covers the cost of over 3,100 prescription drugs. In the last four years since we came to power initially in 1995, 1,018 products have been added to the Ontario drug benefit. Now, \$1.6 billion is what the Ontario drug benefit is costing Ontarians, and it covers 2.2 million seniors and social assistance recipients. In 1998-99, 44 million prescriptions were filled. I want to repeat that: 44 million prescriptions were filled.

We also have the Trillium drug program, as you're aware. It's a unique program. It's for those who are not otherwise eligible for the Ontario drug benefit and still have high drug costs. Approximately 100,000 Ontarians who need expensive drugs to treat various serious illnesses--nothing major: cancer, HIV, cystic fibrosis--receive benefits under this program. Expenditures for the Trillium drug program for 1998-99 totalled \$45.5 million, an increase of over \$10 million in one year.

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These are the things this government is doing for the people of Ontario. We ask the federal government what it's doing for the people of Ontario. I'm looking to hear. I realize there may be a federal election in another six months or a year or eighteen months, as soon as the Prime Minister is sure that he doesn't have to take ownership for the health care issue. He wants to appear to be the saviour of the health care system. Anybody who admits to having cut the heart out of the health care system can hardly be called a saviour.

I'd like to quote what Jean Chrétien said, if I can find the quote.

**Mr Bartolucci:** Make it up.









**Mr Wettlaufer:** No, I'm not going to make it up. I never do that. I will quote something else, though.

"Only the federal government continues to use 'tax points' and cash in describing its programs. This makes the numbers look bigger." That was by Mike McCracken in "Contra-cyclical Fiscal Policy: Is It Dead?" That was in the Monthly Economic Review, volume XVI, number 12, July 30, 1998.

I'm sure the people of Ontario have heard a lot in newspapers lately and on TV and on the radio. The federal government, Jean Chrétien, is talking a lot about tax points. He's saying: "Oh, the provinces are doing so much better now because of all these tax points. Look at the tax points today compared to what they were in 1985 or 1977." Forget the tax points. They've cut \$4.2 billion. Mike McCracken says that only the federal government combines the two in their discussions.

This is another quote: "The federal government has no control over the use of these tax points, nor do they constitute an expenditure or revenue item in the federal budget. They do, however, provide a convenient shield"--a convenient shield--"for the federal government to reduce its cash outlays while claiming that overall entitlements are only frozen or marginally increasing. For these reasons, the forum considers the inclusion of tax points in the federal contribution to be confusing and unhelpful." That was the National Forum on Health, Maintaining a National Health Care System: a Question of Principle(s) ... and Money, in February 1996.

Only the Prime Minister could confuse things. But at the same time he said, and he was quoted in the Toronto Star as having said, on October 27, 1996, "We needed to squeeze [medicare] in order to save it." That's what Jean Chrétien said.

What did Allan Rock say? Allan Rock, in his speech to the 130th annual meeting of the Canadian Medical Association in Victoria, BC, August 20, 1997, said: "But I am part of the problem, not the solution. It was my government that diminished the size of transfer payments." That's the federal health minister, Allan Rock.

All we're asking, not just in Ontario but in all the provinces, is for the federal government to come back to the table. Please be a player, for the benefit of the citizens of this country. Is that so difficult? That's what this resolution addresses. The third party recognizes this. But the Liberals, because they're the official opposition, who don't even play the role of an official opposition, are opposing it because they are Liberals, and I presume because their federal cousins who govern this country are also Liberals.

**The Speaker:** Further debate?

**Ms Caroline Di Cocco (Sarnia-Lambton):** I'm pleased to have this opportunity to speak on Mr Harris's motion. I'm also pleased that you have officially declared that we're not rookies any more.

I want to start off by suggesting, first of all, that we stop the blaming and we start taking responsibility. It's time that the Harris Tories show good leadership and for once take responsibility and stop blaming others.

I picked up a book called Moral Leadership: Facing Canada's Leadership Crisis, by Robert Evans. He articulates this trend of what he calls "a culture of blame avoidance now rampant." The Harris Tories are at the leading edge of this culture of blame.

Today I met with Lawrence and Kay Greenaway, the founders of the Breast Cancer Society of Canada. What they told me was quite disturbing. Of the 273 mammography machines in Ontario, 60% are not accredited. Considering that early detection is crucial to successful treatment, I cannot believe that 60% of the machines are not subject to quality control. Who's responsible to regulate mandatory accreditation for these machines that can detect breast cancer? Let's remember that this disease took 2,100 lives last year in this province. The Greenaways have done their part. They take responsibility. They raised millions of dollars for research. Not only do the Harris Conservatives not take responsibility, but Minister Witmer will not even meet with the founders of the Breast Cancer Society of Canada.

One of the things I've always heard from my parents is that if we don't have our health, we have nothing.





Taking care of our health is more important than money, no question. I add to this: If we do not have a good health care system, what good are tax cuts?

Mr Harris's resolution denouncing and blaming the federal government for the crisis in health care has been preceded by a taxpayer-funded advertising campaign. I have watched with interest the involvement of the Harris neo-Conservatives in the federal arena of the renamed Reform Party, now known as the Canadian Alliance. Concurrently, there have been advertisements denouncing the federal government and distorting the facts about the complex matter of cash and tax transfers. This leads me to wonder if the blaming game and costly taxpayer-paid partisan advertising is a less than discreet attempt by the Tories to play politics in the big arena at the federal level. They're using health care as their weapon. That is what you're using. Dalton McGuinty and the provincial Liberal caucus believe that partisan advertising should be banned.

The Harris government has continually extolled the virtues of tax cuts. Again last week I heard from the members that the Conservatives have cut taxes 99 times. I wonder if there is a direct connection between continued tax cuts and continued funding constraints to the various sectors of health, education and the environment, and to social, cultural and heritage programs. Now we hear this loud complaining that there's no additional funding, yet the province is losing \$4 billion to \$5 billion in tax revenues. I recall Harris justifying these tax cuts somewhere as an indirect way to provide better health care, so less personal income tax revenues to the province will add up somehow to more money for health care. Go figure.

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Although the budget rhetoric is going to include things such as health and education and strong and secure communities, the focus on tax cuts will force a reduction of the government's role in health and education and community support programs. This is at a time when there needs to be significant reinvestment in these services because of the cuts during deficit years.

The government has indicated it intends to aggressively restrict expenditures in education, community and social services, and support for municipalities. A key tool in this policy is the government's decision to essentially pre-spend much of the fiscal dividend on tax cuts. So they don't have the money to put into these social programs.

The people of Ontario are beginning to realize that there is a significant price we all pay in both the quality of life for all Ontarians and the basic civility in Ontario society. This has been a Harris revolution, with many victims and casualties. We brag to the world about our quality of life while the Harris government moves to undermine the very things that contribute so much to our quality of life.

The province has the responsibility for health care. You know it; I know it; the people of Ontario know it. When you choose, and the Harris Tories choose, not to take responsibility, you play the blaming game: Attack the teachers, blame the school boards, blame welfare recipients, blame past governments, blame the federal government.

From very early on in my life, I was taught to take responsibility for my actions and for my decisions. This is considered a mature approach in our everyday lives, in carrying out our daily jobs, and is the basis of credible, responsible decision-making. So why has the Harris government been playing the blaming game for so long? Is the Harris government not responsible for the consequences of decisions made in this House? But I forgot--I think I've heard numerous times that they are not a government. They must have said it over and over again. I don't understand what they're here for, because they're not a government.

**Interjection:** They're here to fix government.

**Ms Di Cocco:** That's right. They're here to fix government, but they're not government.

Minister Witmer stated just last week that the Harris Tories have maintained a quality health care system. I have to add, there was a feature article in the London Free Press by Mary Jane Egan on





February 5 of this year. The headline stated, "Hemorrhaging Health Care," and right underneath that headline it said, "A highly skilled London eye surgeon pulling up stakes for the United States is only one symptom of a health care system losing doctors faster than they can be replaced." This headline must be fiction because, according to Minister Witmer, the Tories have maintained a quality health care system.

Dr Probst, a 34-year-old ophthalmologist, moved his practice to Michigan on March 1 of this year, and I'll quote what he said: "Hospitals in London and across Ontario have been forced to cut operating time for eye surgery in half because they can't afford to cover the procedures." But according to Minister Witmer, they have maintained a quality health care system.

I have a letter from the Ivey Institute of Ophthalmology in London, Ontario, to a patient in Sarnia, dated this February 10, that the funding situation in London is extremely tight and that level 2 care for patients from Lambton county depletes the funding for patients who reside in Middlesex county. But again, let's remember that Minister Witmer says the Harris Tories have maintained a quality health care system.

I'll give you one other example within a 100-kilometre radius, that of an ophthalmologist who shut his doors in October in Lambton county because Minister Witmer's ministry changed the geographic boundaries and disallowed his exemption of OHIP funding caps for underserved areas.

I handed in a petition with about 4,000 signatures of people affected by not having their cataracts, glaucoma and other eye conditions looked after in a timely fashion. But all these people must be wrong because--I'll say it again--Minister Witmer said the Harris Tories have maintained a quality health care system. I have received hundreds of letters, phone calls and e-mails on this and other health matters, yet the Harris government chooses not to address it.

Why did the Harris government make such drastic cuts to hospitals? You have not reformed health care. Instead, you've cut hospital beds and restructured hospitals. Dr Sinclair, head of the Health Services Restructuring Commission, is on record as saying that hospital restructuring has put the cart before the horse.

### *Interjections.*

**The Speaker:** Would the member take her seat. Order. The member has the floor.

Would the member continue, please.

**Ms Di Cocco:** Thank you, Speaker. The Ontario Health Services Restructuring Commission held its first meeting on April 24, 1996. At that meeting--and it's in the documents--an agreement was reached on the following approach to fulfilling the Health Services Restructuring Commission's mandate: acceptance of the prime mandate of the HSRC to facilitate hospital restructuring. The HSRC would have preferred, however, to deal initially with restructuring of the primary care and community service systems as the first order of business rather than beginning with the task of restructuring hospitals. In other words, it would have made more sense to begin restructuring or creation of a genuine health services system at its front end rather than with the institutions of last resort. Again, you can read it in the report from the HSRC.

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When banks changed, they put in automated tellers before they shut their branches. However, the Harris Tories have not done this. They closed beds, they restructured, before they had a viable contingency plan in place.

The government likes to pretend that federal contributions toward health spending continue to decline in Ontario. I have some other figures. In fact, last year the federal contribution to health care spending grew faster than the provincial increase, and I'll show you why: 55% of the \$1.647-billion increase in provincial spending was the result of \$945 million in additional federal entitlement, while provincial funding was just \$702 million. The source is the 1999-2000 provincial budget papers. For every additional federal dollar, Ontario kicked in just another 80 cents. The province drew only \$755 million



of its share of the \$1.3 billion available from the federal government. The balance is sitting in a bank account earning interest. An additional \$190 million in federal funding came from changes to the CHST formula.

We on this side of the House want a commitment from the Harris government that any additional federal funding for health goes specifically to health care. Additional health spending should not be diverted for further tax cuts or other spending priorities, but instead should be used for real improvements in health care. Improvements, however, do not seem to be a priority for this government. If they were, cancer patients awaiting health care wouldn't be forced to go out of the country for care.

How much longer can health care in this province be eroded beyond the point of repair? To lay blame solely at the federal level, in my estimation, is highly irresponsible.

I would like to review some of the actions of this government since 1995. They set out on a path of restructuring, of creating a crisis, of cutting and cutting. Of course, we keep hearing about the tax cut agenda. Health care has not been high on the Conservative agenda, and we all know that. What has actually happened is that restructuring of hospitals has been done backwards.

The way it was explained to me by Dr Sinclair is that the first point of contact in the health care system is a family physician. It is from this primary point of contact that people are cared for. They are sent for tests, referred to specialists, and, the last point of care, sent to hospital. Now we have a system that has been broken. It's in crisis. Since 1995, the Conservatives, as we all remember, have fired 10,000 nurses, have been restructuring, have been closing hospitals, have been cutting hospital beds.

What is poor management of the Harris government is that there's no plan to fix it, nor was there a thoughtful approach to change. What is worse is that the Harris Tories do not take responsibility for the consequences of their decisions. The Harris government is good at blaming others, and you're spending million of dollars on a TV advertising campaign to blame the federal government about health care. Would this money not have better served the province of Ontario if it had been invested into health care?

I would like to put on record the deliberation from the hospital restructuring commission. They said that the role and responsibility of the provincial government--it is on page 165 of the document--is to retain authority for overall policy, to provide leadership and high-level direction to the health system, and to be ultimately accountable for the provision and management of health services.

The provincial government has the constitutional responsibility for the provision and management of health care services, and must therefore retain accountability for its handling of this portfolio, regardless of whether it manages directly or creates and delegates this responsibility to others.

This motion that Mr Harris put out is an abdication of this responsibility as a government. The contrast to the hospital and health care crisis is strong economic growth in this province. If we have such a healthy economy, why does it not translate to a better health care system in this province? The Harris neo-Conservatives are destroying the social fabric, and we know it.

**Mr Steve Gilchrist (Scarborough East):** And now for something completely different. I would like to start with a couple of quick quotes. "It is a fact that during our first mandate, this government reduced transfer payments to the provinces." That was the Liberal 1997 red book. Jean Chrétien, our Prime Minister, said in the Toronto Star on October 27, 1996, "We needed to squeeze [medicare] in order to save it." Our current health minister, Allan Rock, in a speech to the 130th annual meeting of the Canadian Medical Association on August 20, 1997, said: "I am part of the problem, not the solution. It was my government that diminished the size of transfer payments."

**Hon John R. Baird (Minister of Community and Social Services, minister responsible for francophone affairs):** Who said that?

**Mr Gilchrist:** That was Allan Rock, the federal health minister.

Before the most recent federal election, the federal Liberal government, as most parties do,





commissioned extensive public surveys. They went to Angus Reid and Angus Reid came back and told them, before the budget and before the election, that health care is the number one concern in the minds of Canadians. They were told that it mattered far more than tax cuts; it mattered far more than any spending issue; it mattered far more than any of the boondoggles that they were otherwise involved in. Despite that, the most recent federal budget had a grand total of 2% of new spending in health. So we have a bit of a contradiction. On the one hand the federal Liberals join with us in saying that there is a crisis in funding, but when they had an opportunity to stand up and be accountable, they chose to look elsewhere. It is indeed regrettable and I think it compounds a very fundamental problem on the part of the federal Liberal government, and I regret to say, perhaps some of their colleagues in this Legislature: They're not prepared to recognize their responsibility in this, the most important category of government spending.

You've heard before in this debate that the original premise behind the Canada Health Act was that the province and the federal government would share responsibility, and that was quite appropriate given that health was a defined provincial role. So for the federal government to intervene in any way, to have a say, to engineer a countrywide common health strategy, it was appropriate for the province to say, "If you want to have say, you have to be part of the pay." In fact, to their credit, in those early years the federal government did pony up 50% of the cost of the health care systems all across Canada. Today, their percentage has shrunk to an almost insignificant 11%. They would argue, by throwing issues such as tax points back on the table--a red herring if there ever was one because tax points haven't changed in over 25 years. But if you throw that back on the table, they say: "Guess what? We're really not ripping you off by paying only 11%. We're ripping you off by paying 34%." And what a compelling argument that is. They are still, by their own words, one-third below the standard that was the overriding premise behind the creation of the act in the first place, behind the creation of the partnership between the provinces and the federal government. We do not want to believe that the federal government really pays that little heed to health care issues across this country, but I'm afraid their budget would suggest otherwise, and that's the current federal Liberal government.

During the mid-1990s they made a very historic decision. They decided to make the biggest cuts to health care in the history of this country. Today, the annual base funding for the federal program that supports health care is still \$4.2 billion lower than the day the Liberal government was elected--\$4.2 billion. Contrast that with the cost of any number of the initiatives that our government has undertaken and you would see just how far our share of that \$4.2 billion would go.

When you talk about a large metropolitan hospital taking approximately \$100 million to operate, if Ontario was just getting its fair share of that \$4.2 billion, we would be running another 18 hospitals, large metropolitan hospitals. Put another way, countless numbers of new dialysis machines, dozens of new MRI machines, any category you care to mention, this province would have infinitely greater ability to meet the increasing needs and demands of an aging population, to embrace new technology, to guarantee that even in the most remote parts of this province we offer the same quality of health care that we take for granted down here in Toronto.

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We don't have that ability, despite the fact that since we were elected in 1995 the provincial health budget has gone from \$17.6 billion to \$20.6 billion. We have committed an additional \$3 billion at the same time our share of those federal funds, \$1.7 billion, was removed by the federal Liberal government.

In very real terms, it can be said that we've made up \$4.7 billion worth of maintenance or increased funding to health care, a staggering percentage of the money that's being spent in this province today. Where is that money going? Let's talk about a number of the initiatives this province has committed to: a primary care network, a new way of providing medical care--we've got pilot projects in four different locations since 1998, and three more were added in September 1999; ways of making sure that family doctors are available on a seven-day-a-week, 24-hour-a-day model; guaranteeing that family doctors will participate by tying themselves individually to patients so that they have a far greater awareness of the needs of individual patients, but the patients, in turn, are guaranteed greater access. I didn't see my federal counterpart at any of the announcements that were made in connection with that program.





We have the Ontario drug benefit plan. The ODB is the largest pharmaceutical plan in the country. It covers the cost of over 3,100 prescription drugs; 1,018 products have been added to that list since our government took office in 1995. It's a \$1.6-billion program that covers 2.2 million seniors and social assistance recipients, and last year, 44 million prescriptions were filled.

We also have the Trillium drug program. It's quite unique because it's for those who don't qualify for the ODB and who have high drug costs. Approximately 100,000 Ontarians who need expensive drugs to treat serious illnesses like cancer, HIV and cystic fibrosis have their drugs paid for by this program. Expenditures under that program cost \$45.5 million last year.

Our third drug plan, the special drugs program, covers the full cost of certain expensive outpatient drugs, such as specific drugs for AIDS, organ transplants, cystic fibrosis, schizophrenia and thalassemia. The program provides funding to over 12,000 beneficiaries at a cost of approximately \$92 million annually.

Again, I don't recall seeing our federal brethren standing up and taking any share of the responsibility for those programs or their expansions.

We've heard the federal Minister of Health suggest that we need to look at expansions in home care. That's very interesting, perhaps, if you live in one of the eight provinces that don't already have a generous home care program. Ontario has by far the most generous program. We currently spend \$1.5 billion annually on home care and community care services. Since we were elected, the funding for community services has increased by 49% and in-home services have increased by 56%. We're providing \$115 per capita. The next highest province is Manitoba at \$97.62. The other eight provinces are barely on the map.

Beginning in 1998-99, the Ministry of Health and Long-Term Care was also investing \$550 million over six years to expand and enhance community services, such as in-home nursing, therapy and homemaking, supportive housing, attendant outreach and services for individuals with physical disabilities. I didn't see any federal MPs at that announcement in 1998-99.

Community care access centres: In 1996, this government established 43 CCACs all across the province, with a view of providing support to Ontario residents who seek community-based, long-term health care. This guaranteed that services would be delivered closer to home for all Ontario citizens.

In 1999-2000, the ministry is providing CCACs with a total of \$53 million in additional permanent annual funding to provide additional nursing, homemaking and therapy services. Not to be repetitive, no federal member was there to pony up their share of that funding increase.

And perhaps the most important initiative the government has undertaken: In April 1998, the government announced the largest ever expansion of health services in Ontario. We're going to be investing \$1.2 billion to improve long-term-care facilities and community programs. No new long-term-care beds had been built in this province in the previous 10 years despite an obvious aging of our society. Our commitment would add 6,700 new beds back in December 1998, and in addition to adding the equivalent of 175 new nursing homes, we're also rebuilding and renovating 100 older facilities so that they'll comply with today's new standards to promote a better quality of life for all residents. I'm pleased to say that the Metro Toronto Legion Village in my riding has been a beneficiary of just such a renovation. The veterans who live in that building, I can tell you, have benefited tremendously by the increased size of the rooms, the increased commitment to providing the technology and the equipment that only a fully funded health care system can provide.

I could go on at great length about the other initiatives, but I don't think too well of it because in every case it ends with the same punch line: There is no federal involvement. At the same time as they come out with the flowery phrases, as they come to more and more meetings and suggest that we need more and more studies, we have recognized the need for increased funding, we have come up with the dollars for the long-suffering taxpayers in this province, and we have been able to balance the tax revenue to commit that extra \$3 billion and make up the \$1.7 billion that the federal government had cut.

When we launched our advertisements calling on the federal government to meet their responsibility, to



review what they had planned in their budget and, in fact, before passing any budget bill, to guarantee that they came up with the dollars that they really should be contributing, not just to this province but to all the provinces, the Ontario long-term care association issued a statement. They said, "The association and its members are supportive of the message contained in the public awareness campaign launched today by the provincial government to address the issue," the issue of the underfunding, to put pressure to restore the \$4.2 billion and to educate Ontarians, and indeed Canadians, as to what was happening to federal health care funding since the Chrétien government was elected.

We've got to condemn the most recent statement by a spokesman for the federal finance minister, who implied that increasing health funding was a waste of money. We had the recent meeting just a couple of weeks ago, where our Minister of Health and the other provincial ministers met with Allan Rock, the federal health minister. Mr Rock didn't come to the meeting with a commitment to provide stable long-term funding, and while that was perhaps a disappointment to some, it was hardly surprising.

Mr Rock was told about all the initiatives Ontario and other provinces have committed to. He was told how generous our home care program is. He was told how generous our drug plan is. At the end of the meeting, Mr Rock came out and told the press that he found that whole meeting very enlightening, to which the press response was, "You didn't know all of these things already?" His comeback was, "Well, yes, I guess I did." Once again, we had just another stalling tactic, just another sham, where the federal government, under the guise of listening to Ontarians and other Canadians, had really done nothing more than stall another few weeks until the next election.

I don't think the people in this province are going to have the wool pulled over their eyes any longer. The reality is, even with their announced increases in health care funding, it will take until the year 2002-03 for the federal government to catch up to the actual out-of-pocket spending that they were making in 1995. While that sounds very well and good, the reality is there will be 2.3 million more Canadians by the year 2003 than there were eight years previous, 2.3 million Canadians in an aging population who need increasing amounts of health care, who need increasing allocations for drug plans and for home care. To simply catch up to where they were in 1995 is not good enough. They must meet their responsibility. They must come forward and recommit to a 50-50 funding relationship. Anything less than that is a betrayal of Tommy Douglas, a betrayal of all of those who originally crafted medicare.

2010

**Mr Bisson:** You said "Tommy Douglas" and didn't faint.

**Mr Gilchrist:** I did say "Tommy Douglas." I'll give credit where it's due, to my honourable colleague.

The reality is, all of those people who in the early years truly believed that there was a partnership being formed between the provinces and the federal government have been betrayed by the actions of the federal government since then.

The Prime Minister was quoted in February as saying that the total value in cash and tax points is now slightly higher than the \$28 billion when the Liberals took office in 1993. But here are the facts: Between 1994-95 and 1998-99, the federal government cut the annual CHST cash entitlements by \$6.2 billion, or 33%. Since then, the federal government restored only \$2 billion of those cuts in its budget last year. Clearly that still leaves a funding gap of \$4.2 billion. The inclusion of tax points distorts the facts. Let's compare apples to apples. The fact is the federal government provided provinces \$18.7 billion in cash in 1994, not tax points, not tax room, but simple, old-fashioned Canadian dollars. Today we want the same amount of CHST cash.

Federal myths: The finance department itself proclaimed these tax points to be part of its contribution, but this was always a gross misrepresentation. A transfer is money that the federal government provides to the provinces out of its taxes, not the provinces' taxes. With the replacement of EPF by the CHST, even the finance department has had to give up pretending otherwise. It's a shame that the health minister and the Prime Minister won't even follow their own bureaucrats in honestly recounting their shortfall. The federal contribution, even by their own admission, in 1997 had dropped to 15%, and as I said earlier, today it's down to 11%.





What matters is federal cash contributions dedicated to health, not other cash payments to provinces such as equalization, nor the artificial notions of entitlements and tax transfers. This is from the National Forum on Health back in February 1996, "However, the federal government has no control over the use of these tax points, nor do they constitute an expenditure or revenue item in the federal budget." I guess we can take credit for the fact that, having raised this issue some months ago and having now turned the heat up through the advertisements we've been running to raise awareness all across Ontario of what has really happened to health care funding, the last-gasp, desperate measure of the federal government was to come up with this concept of tax points as their salvation, as their way of saving face. It's not going to fly. The bottom line is the bottom line.

Our government recognizes the importance of health care. Every budget has seen increasing amounts of money dedicated to important health care initiatives such as the ones I recounted earlier. That's no less true in our most recent budget, where we've committed to another \$2-billion increase, the largest increase by any province in the history of Canada. There is no doubt, though, that if both levels of government were paying their fair share even more could be done for the people of this province who need cancer care, who need cardiac care, who need very expensive services for any number of ailments.

The reality, as we look at our local hospitals, is that we see new dialysis wards, we see new expansions in cardiac care. We've seen a vast expansion in expenditures on cancer care. We've seen more money go into hiring nurses, more money into emergency rooms, more money for hospital renovation. But the fact of the matter is, we still have a long way to go, and only with the federal money can we make that last step.

I don't think there's much more to be said, except another quote from Allan Rock: "I will not stand here and tell you the cuts in transfer payments we made were insignificant. They were not. And I won't tell you that they have not had an impact. They have."

This resolution begs a very simple response from all members in this House. If they care about their commitment to defend the interests of the people who elected them, they should put aside their party membership, put aside their allegiance in the back rooms and guarantee that it's a common commitment to the federal government to restore full funding for health care in the province of Ontario.

**Mr Bruce Crozier (Essex):** I'm pleased to join this debate on the resolution and the amendments thereto. Throughout the debate in the last few days, our constituents at home have heard a lot of references to the transfer payments and to EPFs, which is established programs financing. They've heard a lot said about the CHST, which is the Canada health and social transfer. I just wanted to add to the comments of my colleague who spoke just a moment ago and give a little bit of history. I'm not going to get into the numbers, because I think the numbers have been convoluted by practically every speaker who has preceded me, but certainly not by my friend from Renfrew-Nipissing-Pembroke earlier today: he told it as it is. I want to give you a little bit of history on what is commonly known as the Canada health and social transfer.

Part of those transfers are referred to as tax points. The tax point transfer system was established by the Federal-Provincial Fiscal Arrangement Act in 1977. Other federal-provincial fiscal arrangements actually predate the legislation, and these include some of the following:

In 1958, under the Hospital Insurance and Diagnostic Services Act, the federal government provided the provinces with 25% of their per capita costs and 25% of the national per capita costs times their population.

In 1965, the Established Programs (Interim Arrangements) Act, permitted opting out by the provinces with compensation, and only Quebec chose to do so.

In 1966, the Canada assistance plan, commonly referred to as CAP, initiated a 50-50 shared-cost program for various social purposes.

In 1967, the post-secondary education cost sharing agreement, PSE, between the federal and provincial





governments: Cost sharing was 50% of the operating costs or a specific per capita amount if a province so desired.

In 1968, the Medical Care Act came into force, and by 1972 all the provinces had signed on. Ottawa paid 50% of the national average cost that was distributed to the provinces on an equal per capita basis.

In 1972, the federal government capped the growth in the post-secondary education contributions at 15% per annum.

In 1975-76, as part of its anti-inflation program, the federal government introduced a series of restraints on medical payments to the provinces.

**Established programs financing:** In 1977, following the passage of the Federal-Provincial Fiscal Arrangements Act--and I emphasize that these are federal-provincial agreements--the federal government gave up a share of its income tax revenues to the provinces. In place of the cash payments formerly made to finance the federal share of three established cost-sharing programs--hospital insurance, medicare and post-secondary education--Ottawa transferred to the provinces an additional 9.143 personal income tax points, in addition to the existing 4.357 points that it had surrendered previously and the 1 point of corporation income tax, for a total of 13.5 points.

The previous speaker to me, from Scarborough, said there had not been any change, but obviously in 1977 there was. These tax points were incorporated into provincial tax regimes and were equalized via the formula of equalization like other provincial revenue. These equalized transfers were notional; there were no actual transfers of cash. But the only thing we hear of in the Legislature is transfers of cash.

2020

It's interesting to me that it was only three or four months ago, in the fall of last year, that all we heard from the provincial government was, "The federal government should look at tax breaks, tax reductions." I didn't hear anything from them last fall about the fact that any kind of change should be made in the cash transfers or the tax point transfers to provincial governments specifically for health care. Now that the federal government has brought forth a budget that not only introduced tax reduction but increased the amount that is paid for health care throughout Canada, we hear that lonely voice in the woods saying, "What we need is more money."

When I came to this Legislature in 1993, I recall that Mike Harris, as leader of the third party, sat down here just a few desks away, and all he could say to the government of the day was, "You don't have a revenue problem; you have a spending problem." What does Mike Harris want now? He wants more money. He just wants more money. He keeps saying, "Give me more money." I would say to the Premier that he should think back to when he said, "The government doesn't have a revenue problem; it has a spending problem."

**Ms Mushinski:** He's not saying that. He's saying, "Give it back."

**Mr Crozier:** He certainly isn't saying that today. His tune has changed completely, because now he's the government. That's the point I am trying to make: It depends on what time it is and what he is talking about as to whether he wants more money or tax cuts. We've seen what tax cuts do to us. We've seen where he has given money to the rich and taken from those who don't have it. Part of the result of doing that is the fact that health care has suffered.

There has been a cash floor established throughout this time, and I, like many others, hope the federal government will pay its fair share. I encourage the federal government to pay its fair share. Certainly I am part of that Liberal--they are my Liberal colleagues. This discussion has gone on not only at the federal level, as far as the Liberal Party or the Liberal government is concerned; it goes on every day in our caucus. We too are concerned about health care in Ontario.

But we are not the only ones concerned. I have even heard the Premier and others on the other side say, "We are delivering more and better health care than we have ever delivered in history." Let me tell you



what Henry from Bell River says when he calls my office. I assume that all members of this Legislature get calls that are similar to mine. This constituent's wife called the office. They have received notice from their doctor that he is retiring and giving up his practice. He doesn't have any other doctor coming in to take over his patients. "They're left out on the sidewalk," in the words of Henry's wife. "How can the government allow them to do this?"

We explained that we're aware of the lack of physicians in our area. I live in an under-serviced area. But does this government give more to education to open up more medical spaces? We suggested that at least a 15% increase should be available for educational medical spaces in this province. But is the government doing this? Their answer to that is: "We'll simply increase tuition fees. In fact, in some professions we'll deregulate the tuition fees."

The option my constituents see they have is that they are to call the Essex county medical association and be referred to a doctor. The problem is that most, if not all, the doctors in our area aren't taking on new patients. So they have to use a walk-in clinic, several of which are in the county, but most are in the city of Windsor. This is a very serious concern for these constituents, and they say in conclusion: "This government is terrible. Who voted them in anyway?" Well, I'm not sure who did.

I have another memo from Nick, who lives in Emeryville. He called and spoke to us about the sorry state of our health care system. What I want to point out is that it is the province that is responsible for the delivery of health care, as was pointed out by my colleague from Sarnia in the health care restructuring commission's report. It's the province's responsibility. Here again, I wonder what it is the Premier means when he says: "In all areas of the government, we have to do more with less." I'm not suggesting that we should do more with less when it comes to health care, but I haven't heard that the Premier has differentiated between doing more for less in health care and doing more for less in any other area of government services.

This constituent is so beside himself that he feels they should privatize health care, that he would be willing to pay the cost of his vaccination. That isn't what health care is all about, nor is it what health care has been all about in Ontario or in Canada. We feel that there should be health care that's comprehensive, universal, has portability, has public administration and, most of all, is accessible. In other words, we agree with the Canada Health Act.

I have another one, from Marilyn in Lakeshore township, who called to complain about health care. Frankly, I have files at home that are full of these kinds of comments. She has been ill for 10 months, diagnosed with six different ailments. She has a breathing problem; went to the ER and was sent home. She has been sent from doctor to doctor; sometimes she has to wait two or three months for a doctor. She feels she's getting an expensive runaround.

That brings to our mind that there should be primary health care reform. She shouldn't have to go from doctor to doctor. She shouldn't have to go find a doctor who will treat the ailments she has--at great cost, by the way, to our health care system. It seems nobody knows for certain what is wrong.

I think that's a very important statement she has made. We've been debating this resolution for two or three days and we're going to go on, I suspect, at some length. She says, "Nobody knows for certain what is wrong." I suspect that's what all of us are trying to find the answer to: What's wrong? She has pain in the larynx and throat area. The specialist has sent her back to the original respirologist and she now has a two-month wait to see him. She has also been told that her problem may be psychological.

Can you imagine? This woman wants to know what's wrong with her. She's batted from one doctor to another in our health care system, at great cost, but she really doesn't know whether anybody knows for certain what's wrong. Frankly, in that case, I gave her the Minister of Health's address and hoped that she would write to Minister Witmer and see what her response might be.

I have Doreen, from LaSalle, who called and said that they just moved from Toronto. Her husband has a job in the area, and the problem is she can't get a doctor in LaSalle or in the city or in the county to take them as new patients. They have a five-month-old who obviously needs care. They've called the medical society to get a list of doctors. There was only one accepting new patients, and the first appointment





available was in July. I received this message and had this conversation with this constituent in early April.

She goes on to say that this is not acceptable to them. The baby needs her shots and can't go without a doctor. She and her husband could get by with visiting a walk-in clinic, but not the baby. Again, the only answer that we can give to them is that they should call the local medical society and hope that someone would be able to answer their needs.

2030

A little bit more of the history of medical care in our area: In the early to mid-1960s, Hopewell Hospital had been operating for years in our community. Had it not been for the Rotary Club some years before, a community the size of Leamington, where I live, might not even have had a hospital. But thank goodness the Rotary Club of the day took that obligation and we had our own hospital. It just so happens, by coincidence of the change in riding boundaries, that there isn't a hospital in the riding of Essex. We rely on the Leamington District Memorial Hospital, we rely on Windsor Regional Hospital, we rely on Windsor Hotel-Dieu Grace and, to some extent, up in the northeast part of the county they rely on the Chatham-Kent Health Alliance hospital.

It doesn't matter that I don't have a hospital right within my riding. The important thing is that we have access to hospitals, that we have access to that medical care. What have we found? Those hospitals in our area are running near-deficits or are in fact running deficits. Some of them have to dip into their savings, if you like, into their trust money in order to make their hospitals function. I repeat that it's the responsibility of the province to carry out the delivery of health care in our area.

Earlier today my colleague from Renfrew, I believe during his address, mentioned ambulance service. One of the things I can't understand, although I think I know the motive behind it, is that ambulance service is now a municipal responsibility. Ambulance service is, for many of our constituents, the very first contact they have with our health care system, and what has happened? The province has downloaded it on to the municipalities. We've heard a lot said in this Legislature in the last couple of days blaming someone else, someone else calling the kettle black. Well, I suggest that when it comes to ambulance service, that's an integral part of our health care system, and yet I think this provincial government has to take responsibility for having downloaded that on to the municipalities.

Fortunately I know the resilience, the dedication and the understanding of the people in my constituency. I know that even though the county has now been given responsibility for the operation of ambulances in our area, it will be a first-class ambulance service. But that doesn't take away from the fact that this government has abdicated its responsibility for one of the very first contact points that all of our constituents have with our health care system.

I think it's a shame that we have two levels of government, the province and the federal government, who are now using what could be valuable health care money to throw stones at each other. How many of us heard that people in glass houses shouldn't throw stones? In this case, I think neither the provincial government nor the federal government should throw stones at each other. They both live in glass houses.

Do you know that we live in the most prosperous times we've ever seen? There is more tax revenue; there is more money. We're told that people are earning more than they've ever earned before. Yet with all this prosperity, and with all the sincerity that we have in this Legislature, we have a health care system that's going down and down and isn't serving its constituents. Shame on all of us. When I look back to my municipal background, I think consensus is what we should be looking for. Let's stop the bickering. Let's stop the waste of advertising money when it could be used on health care and get together on this.

**Mr Bisson:** I appreciate having the opportunity to participate in this debate. I want to say at the outset that I am going to support this motion because my view has always been the same. In the time from 1990 to 1995, when we were the government, the federal government of the day, both the government of Brian Mulroney and the government of Jean Chrétien later, after 1993, exercised what is the most





I remember that before I came to this place in 1990 the federal government's share of health care costs in Ontario was 50 cents on the dollar. We find ourselves today in a situation where, depending on whose figures you listen to and who you want to believe, it is anywhere from nine to 11 cents. So I agree with the motion put forward by the Conservative government. I believed, when our government tried to go after the federal government in 1992-93 and onwards to get our fair share of transfers for health care dollars and education dollars, that that government was downloading on us and making it very unfair for Ontario to be able to deal adequately with health care needs in this province.

I remember, however, what the then leader of the third party and all of the members of his caucus, the now Minister of Labour and others members of his caucus, had to say about the Rae government when we were proposing that the federal government should engage in discussion with Ontario to give what was our fair share when it came to health care dollars. I'll read from the Hansard of May 11, 1994, what Mike Harris had to say at the time: "When I hear other provinces coming to the federal government, which is \$40 billion in deficit, and whining that we need more money, particularly Ontario, this province whose taxpayers pay the bulk of the federal taxes"--you know, blah, blah, blah, nothing but whining.

I want to know what happened to Mike Harris and I want to know what happened to all the Conservative backbenchers and now cabinet ministers who changed their attitudes from 1994 to today. The Rae government reached across the House to the Liberal opposition and then third party Tories to say: "We don't want to engage in a political debate about what's happening in regard to how the federal government is transferring their responsibilities on to us. Work with us in order to get the dollars that we justly deserve in Ontario." The response we got from Mike Harris at the time was, "Quit your whining." I remember that well.

Now something has happened. They've been converted on the way to government. They walk that road and all of a sudden they've changed their minds. I'll tell you what has happened. It's a real simple thing. It's called politics. This government has read the pulse of what's happening in this nation. People across this country are worried about what's happening to our public system of health care. They worry that it's being underfunded and that the system is starting to show some cracks through it.

Members here have talked about different instances that we've seen in our own constituencies where people are not able to get services. We're seeing in this province, probably in the next federal election, that the number one issue coming up this fall, if there's a federal election, is going to be health care. This provincial Tory government, for political reasons having nothing to do, I would argue, with the idea of trying to get Ontario's fair share, is now whining at the public trough, trying to figure out a way to get into the political debate in order to get the dollars to Ontario that it richly deserves.

I say to the Conservative government, if it wasn't good enough for you in 1993-94, I wonder how much sincerity you have in your debate today. I tell you, I have a bit of a hard time standing in this Legislature or sitting in this Legislature earlier, and listening to some of the comments of the members from across the way complaining about what the federal government has done to the province of Ontario. I agree with you: We've been downloaded. But for you guys all of a sudden to change your tune for political reasons runs not only thin for members of the assembly who have been here for a while, but, I would argue for the public of Ontario. People in my riding, and I would argue people from other ridings, because nowadays as members we get e-mails from all across the province and from all across the country--in fact, I got an e-mail from somebody in Ireland today on an issue of transportation in Ontario. People from across this country and this province are saying: "We are worried about what's happening to public health care. We worry that both the federal and provincial governments of all stripes are challenging our system of health care to the point that it's starting to break down."



I say we have some choices. Ontario and Canada are at a crossroads when it comes to decisions we have to make about health care. We can basically go two ways: We can follow Mike Harris and Ralph Klein and we can start going the way of private health care, because I'll say to the members of this House, as I will say outside of this House, that this government's agenda, along with Ralph Klein's, is to privatize health care at a slow, creeping crawl. That's what the agenda is. You don't care how much money the feds put into it, because at the end of the day your agenda is to make this system for-profit.

I'm not old enough to remember what health care was like before the 1960s. I was born at the end of the 1950s, in 1957. But I do know well enough from the stories I've heard growing up as a young boy in northern Ontario, and eventually a younger man, the stories that my parents and our neighbours went through when they didn't have money to access health care services. We used to have a bit of a joke at home. My grandfather, who died of an aneurysm, tried to go to the hospital for services and died because he couldn't get services at the hospital. A little bit of the story that we had inside the household, because he didn't have the money to pay for health care, was that the only health care service p  p  re had was a high-speed rosary, because that was all we could get. Pray to God that we were healthy enough to live and that our illness would eventually go away, because we didn't have the money to pay; neither did most people in this province.

You only have to look at the United States to see what's happening. Depending on who you believe, literally millions of people, 50 million people, are without health care coverage in the United States. Even those people who have health insurance plans, like my Aunt Lola, who lives in Philadelphia, have to worry, "Is my plan going to cover me when I get sick?" In her particular case, her husband has to keep on working past age 65 only to be able to keep his health coverage, because the plan they would get through the state is not sufficient to cover their health care needs. And they're well-to-do. My uncle and aunt worked all their lives, they put a couple of bucks away, but they face the prospect of losing their life savings over illness, because both of them now are over age 65 and are starting to have some problems as they get older. My uncle Tom has to work because his health care coverage that the state pays is insufficient to cover what their health care needs will be. In fact, I am told by people I talk to from the States, New Jersey and other places, that often where you think you've got health care coverage, if you get too sick and start to tax the system, they just yank your services away.

I say this government's got choices to make, as all governments have choices to make. This government can choose to keep on playing politics with health care, say one thing publicly: "Oh, my Lord, the government's got to give us more money. They've dumped on us"--we know that's happened--or they can decide to try to do something in order to strengthen our health care system.

I will argue that's what we did. That's a choice we made when we were government. Back in the early 1990s, when we were in the midst of the worst recession in the history of this province since the Great Depression of the 1930s, our government made investments in health care that in the end were long-term investments into our health care system to make sure we were able to respond to needs. We were the government that introduced Cancer Care Ontario, not the Conservative government of today. We were the government that introduced a northern residency program, where we trained doctors in northern Ontario by allowing them to do their residency through the northeastern and the northwestern part of this province. I would argue that 75% of the people who go through that program stay in northern Ontario to practise health care. The continuation of that obviously would be a medical school, something that we've always put forward.

We were the government, the Bob Rae government, that introduced MRIs to many of the communities across Ontario: Timmins, just to name one. That was one of the initiatives our government put forward. This government gets up at great length and talks about the investments they've made in health care. My Lord, for five years they've been running on NDP accomplishments, not on their own record. If they had to run on the health care record of the Tory government, it would be what? Making hospital reform a priority before doing primary health care reform. How stupid can you be? Even Duncan Sinclair, the guy who headed their darn hospital restructuring committee, said: "You guys are going at this backwards. You shouldn't be trying to restructure hospitals until you've done primary health care reform." He said that at the beginning of his work and he's now said it at the end, something we in the NDP have been saying since the beginning, something we had started to do when we were the government.





We were the government that introduced and passed the Regulated Health Professions Act to allow health care professionals to work in the system and take some of the burden off the doctors. I would argue it doesn't only take the burden off; midwives, nurse practitioners and various other health care professionals are a more effective and efficient way of providing services to patients, within both the hospital sector and the community sector.

We were the government that introduced long-term-care reform in Ontario by creating a multi-service agency approach. This government's accomplishment wasn't to do something about trying to improve community long-term care; it was about privatizing. You scrapped the MSAs that we as a government had put in place and now you've introduced CCACs, community care access centres, that basically are a vehicle for privatization.

I look at the community of Timmins. For 75 years, the Canadian Red Cross provided health care services in their homes to people in our community with health care and nursing needs. After 75 years of service, the Mike Harris government's approach is: "Let's get rid of them. We don't want them. God forbid that a not-for-profit organization is involved in health care. I believe in private health care."

We now have Olsten, as do most of the communities across this province. That's a choice that this government is making. They are saying they want us to go the way of private health care. The reality is, it's not only bad for health care but it's bad for business as well, because in the end it's much more expensive to deliver health care services by way of a private system than by way of a public system.

This government can talk the line it wants when it comes to getting its fair share from the federal Liberals. We know what the Liberals did. We can sit here and argue. Look at their last budget. For every dollar they gave in tax cuts, they gave two cents to health care. So we know where their priority is. Let's stop this arguing and ping-pong, throwing back and forth, trying to say, "It's your fault; give me more," and let's try to find some way to work together on all sides of this House to come up with real reforms in health care that will move the yardsticks further ahead so that we strengthen our health care system.

The total hypocrisy of this thing is, remember the ads the Conservative government ran when it came to them beseeching the federal government prior to the last budget to give tax cuts? They said the number one priority of the Chrétien Liberals should be to give tax cuts. That's what Mr Mulroney--Mr Harris wanted. Well, Mulroney was even further left than Harris, I would argue, but that's another story. They spent public dollars on advertising and they lobbied the federal government to get the Chrétien government to move on tax cuts. Well, you know what? You got it. The Chrétien government said, "All right, we'll give you tax cuts."

Now they've got the nerve to sit here and whine and say, "We don't have enough money for health care." No wonder. Give your head a shake. It's a choice. Either we socialize the cost of medicine, and that means taxes, or we allow the private sector to deliver it, and then we pay out of our pockets every time we're sick. It's a very simple equation. You can't have it both ways. You can't come into this Legislature on the one hand and preach the virtue of tax cuts and wonder why you're getting cut by the federal government when it comes to health care transfers to Ontario. The Chrétien government made the same decision you did, which is to give tax cuts. For those people on the right--and I would argue some on the left--who think tax cuts are more important than health care, you got your way. You made your bed and now you've got to lie in it. But I would argue that's wrong.

I think tax cuts in the right, proper time make sense if you can afford it, but certainly not when we're in a situation, as we are in Ontario, where we're still running a deficit and have been for the last five years, and certainly not when it comes to a choice of a tax cut in my pocket versus health care.

I hope this doesn't happen to anybody, but if we end up in a private health care system, it will be real simple. You know that little nest egg you're building by way of your mutual funds and that money you're socking away in GICs for a rainy day? Better not have a heart attack or, God forbid, better not get cancer or some other fairly serious disease, because it will be gone.





I've got to tell you a story. My Uncle Conrad died seven or eight years ago, my godfather, a devout Conservative who believed in everything this government is talking about. When he got ill was when he reformed, and he reformed to the NDP, thank God. There's hope for everybody, I think. The point is my uncle, only when he was sick, realized how important it was to have a system of public health care, because up to then he made the same arguments you make: "Why should my tax dollars pay for somebody else's illness because they didn't take care of themselves. They smoked too much. They ate too much. They didn't exercise enough. Why should my tax dollars pay?"

We used to argue, my uncle and I, jokingly, because I loved him a lot and I'm sure he loved me too. I'd say: "Uncle, you never know. Public health care is about making sure that all people get services when they're in need." It was when my uncle got cancer and a heart attack and a whole bunch of other things that he finally, all of a sudden, realized that yes, health care is important. At least my Aunt Odette doesn't have to worry today about having spent the whole amount of money they had gathered through their lives, working hard in a small business they ran, to spend for his health care needs. He passed away and it was a traumatic thing for the whole family. They were like a partnership, the two of them. But at least, because they didn't have to pay health care dollars out of their pocket, she is able to live with some dignity in her retirement. Imagine what would have happened if we had been in the private system. They would have been wiped out. It would have been as simple as that.

What I say to this government is very simple: You have choices. You have choices about how to invest in health care and what to do to make the system better. Yes, I agree, we need to go after the federal government to try to get our transfers back. I wouldn't argue that for one second, but there's a lot of hypocrisy here in light of the fact that the government here has asked the government in Ottawa for tax cuts, got them, and now they're wondering why they're not getting more health care dollars.

At the same time, I've got to say this to the same Mike Harris government that argues: "We've been downloaded on. How unfair for an upper level of government to download on us. Please, help us." Remember the municipalities over here? The municipalities have been downloaded on since 1995 when you guys took power. Just in health care, public health has gone to the municipalities. They don't have the capacity to fund it. As a matter of fact, where I live, some communities are saying, "Jeez, we want to have more control about what happens in public health, because that's a large expenditure item in our budget and we're going to do something about getting these guys under control when it comes to spending." You know what that means. It means to say they're going to get rid of services. Why? Because Mike Harris downloaded that responsibility and that cost on to municipalities.

**Interjection:** Revenue neutral.

**Mr Bisson:** Revenue neutral it wasn't.

Public ambulances? The same idea. They're in the process of transferring all the ambulances to the municipalities. The list goes on.

They also have a bill that I understand they'd like to bring forward which will make it even easier than it was under Bill 26--remember the omnibus bill?--to privatize municipal nursing homes, another way in which they're going to allow municipalities basically to get rid of and send into the private sector municipal homes for the aged. I hope it doesn't happen in my community, because I understand, as do most politicians, most members of the Legislature, that municipal nursing homes are among the best in the province, Golden Manor, to name one.

I say to the government that you have some choices. You have the choice to say, "Yes, we will work with you as the third party," to do what we can in order to assist you to get fair dollars from the federal government. But we don't want to engage in the politics that you're playing by placing huge ads, spending millions of dollars, trying to build this political campaign to be seen as the saviours of health care when we know, quite frankly, you're chameleons when it comes to this particular issue. You're much of a different colour.

The other thing is that you have to make some choices about where you spend health care dollars. I would argue that a tax cut is not the priority in Ontario as far as I'm concerned. The priority is in making



sure that we have dollars for health care and education, those programs that we need to make our communities whole and strong. The types of investments we have to make start. I would argue, with primary health care reform, to look at what we do there, in order to find efficiencies by providing the opportunity for other health care professionals to practise within the system. We need to take a look at ways of putting doctors on salary so that we're able to take some of the load off the doctors, transfer some of the responsibility on to other health care professionals and look at ways that we can create community health care initiatives such as community health clinics across Ontario. I would argue that we need to look at those things before we start engaging in the politics that you're engaging in.

With that, Mr Speaker, I would like to thank you for the opportunity to rise in this debate.

**The Acting Speaker (Mr Michael A. Brown):** Further debate?

**Mr Carl DeFaria (Mississauga East):** I'm pleased to rise today to join in this debate. I have listened to all sides on this debate, and I am quite surprised at the official opposition. I'm not sure whether the official opposition is against the resolution that we are passing just because it involves the federal Liberal government. Actually, I don't know which part of the resolution they are against. The resolution, in part, reads as follows:

"Be it resolved that the Legislative Assembly of the province of Ontario:

"(a) Condemns the government of Canada for cutting, by \$4.2 billion annually, base payments under the federal program that supports health care, the CHST, while provincial governments have increased health spending."

I don't know why the official opposition would be against this resolution. It's clear that the federal government has been cutting the transfer payments on health care, and it's clear that the provincial government has increased its funding in health care.

The second portion of the resolution reads as follows:

"... that the Legislative Assembly of the province of Ontario:

"(b) Urges the government of Canada to repudiate the statement attributed to a spokesperson for the federal finance minister, the Honourable Paul Martin, that increasing health funding would be 'just shovelling money into a hole that's going to open right back up again.'"

The message that we get from our constituents is clear, that health care is the most important service that is provided in Ontario. It's clear that there has been a cut in funding, and it's clear that there is a need for further funding. For a spokesperson for the federal finance minister to make such a statement is completely irresponsible.

The third portion of the resolution reads as follows:

"(c) Urges the government of Canada immediately to restore permanently the health funding that it has cut and to assume its fair share of increased ongoing funding to meet the health needs of our country's aging and growing population."

I can't see anyone in this House being against this resolution, because it's obvious that there is a responsibility both on the federal government and on the provincial government to ensure that the funding for health care is sustainable funding.

It's clear that it's not just a problem in Ontario. The opposition party may blame the government of Mike Harris for Ontario, but what about the governments of other provinces? What about provinces such as British Columbia which has a health care crisis, and it's not a Conservative government? What about the province of Newfoundland that has a Liberal government? All these provinces that have different parties in government have crises in health care, so it's obviously a national crisis and not a crisis that was brought upon Ontario by the government of Mike Harris.





The last portion of the resolution reads as follows:

"(d) Reminds the federal Minister of Health, the Honourable Allan Rock, that the sincerity of his commitment to medicare and the principles of the Canada Health Act would be best demonstrated not by idle rhetoric and vague words but by restoring the health funding he has cut."

All these components of this resolution proposed by the Premier are so clear and to the point that I don't understand why the provincial Liberals would not stand up and support it so that we can, as a province, give a message to the federal government that it's not acceptable that the federal government continue to cut funding on health care when it's clear from the people of Ontario and the people of Canada that health care is so important and is in such dire straits that it needs to be propped up and services need to be restored.

2100

It becomes more confusing when some members on the other side--I think I heard the member for Samia-Lambton indicate that health is a provincial jurisdiction, that it is the role only of the provinces to provide for health care and that the federal government has no role in health care. I would ask the member then, why did the federal government pass the Canada Health Act? If they don't have constitutional jurisdiction, why would they pass a federal act dealing with health care? Why would we have a Minister of Health in the federal government if they have no jurisdiction over health care?

The problem that these statements make is that it brings confusion to the minds of Ontarians who are looking for governments to work together, who are looking for governments to provide service in health care that is acceptable, standards that are excellent. I was hoping this House would unanimously support this resolution to give the clear message to the federal government that we are united in Ontario and that we want to ameliorate the situation in Ontario.

Ontario is very disappointed that the Prime Minister refused to meet with the premiers to discuss the long-term sustainability of the health care system. In order to ensure the sustainability of the health care system, the federal government must restore the \$4.2 billion that it has cut annually from transfers to the provinces and provide an appropriate escalator to help cover increasing costs.

Our province has been leading, and our leadership on health care reform is very clear. It has increased health care funding from \$17.4 billion in 1995-96 to \$20.8 billion in 1999-2000. In contrast, in 1999-2000, Ontario will receive \$1.7 billion less from Ottawa under the Canada health care transfer than it received in 1994-95.

Ontario has a plan to reform health care. Ontario established the Health Services Restructuring Commission to review the hospital system to better deal with patients because we are trying to do better with less money. Even though we have put so much money into the system, we realize that we also have to streamline and make the system more efficient.

We have increased spending on home care 43% since 1995. In fact, the province's home care program is already the most generous in Canada.

Ontario is committed to the reform of primary health care to improve patient access to doctors across the province 24 hours a day, every day of the week, every week of the month and every month of the year.

The federal government claims that their funding of health care is adequate. They provide today only 11% of the total funding in health care. This is clearly a reduction from the 50-50 agreement that was originally put into the health care system when it was founded. The government of Canada keeps playing with these numbers, sometimes saying, "Well, no, it's more than 11%; it's 28%, it's 33%." That is just not acceptable to Ontarians and to Canadians.

I will be supporting this resolution, and I ask the members across the floor to join us in supporting this resolution because it's very important that the message we give to the federal government in health care





is a very clear and united-front type of message. That's what Ontarians expect of us. The bulk of our calls and the bulk of our complaints and people contacting us indicate that they want us to ensure that there is funding there for health care and that health care is protected. All sides here have indicated that health care is important. Now is the time to get united and give a clear message to the federal government that we want the funding restored.

**Mr David Young (Willowdale):** I'm pleased to be able to join this debate and I'm certainly very pleased that the Legislature is sitting into the evening hours to discuss this very important issue. I'm sure all the members here feel likewise.

It's important and it's an urgent issue because, as we have heard earlier this day, Ottawa cut \$6.2 billion from the CHST between the fiscal year 1994-95 and 1998-99. That's a 33% cut. It's a cut that the residents of this province are experiencing each and every day in very real terms. Ottawa did in fact restore \$2 billion, only \$2 billion, in 1999-2000. As I'm sure you have figured, that leaves a \$4.2-billion deficit or cut. Ontario's share of that is \$1.7 billion, a great deal of money. Not only has the province of Ontario, Mike Harris's government, made up that shortfall, but they have increased spending by a further \$3 billion.

By and large, the system is working. Our health care system is there when the residents of Ontario need it. That is not to say that we cannot do better; that is not to say that we will not do better. We must do better. But it must be recalled that for most Ontarians, the health care system is there.

This past weekend within my own family we had occasion to test that principle, and I'm pleased to say that it did in fact work. My wife's grandmother, who lives on her own and has been very little burden to the health care system, who is approaching her 95th birthday, had occasion to attend at one of the emergency departments just outside of the riding of Willowdale. She was triaged by a nurse and assessed within 15 minutes, and within a further 15 minutes was assessed by a physician. This was on a Sunday in the springtime. The system worked for her, and I'm pleased to say that.

With that in mind, you may wonder aloud why there is this ad campaign underway that is costing Ontarians a significant amount of money, let there be no mistake: \$3 million emanating from the province, and an unidentified number that the federal government is spending. By the way, I want to say aloud on this occasion that I'm very disappointed that the federal government has not come forward and been forthright about the amount they are spending on the ads we read in the paper. We did in fact indicate that \$3 million is the figure that is being spent, and certainly it would be incumbent upon our federal counterpart to do the same thing.

Why, then, are we spending this relatively significant amount of money? The answer is because we must. The answer is because it is an investment in the future of all Ontarians. If we are to look at that figure, a figure that in and of itself seems rather substantial--\$3 million from the province alone; an unknown amount from the federal government--that comes to about 50 cents a person in this province. What we are hoping to get back, what we are hoping to receive with that investment, is about \$155 a person, so an investment of 50 cents to recover \$155 a person from the federal government. Indeed, it is true that for a family of four, the total investment is in the neighbourhood of about \$2, the cost of a token on the TTC. The return would be \$620 to that family if the Liberals in Ottawa would come forward and live up to their commitment.

What is that commitment? It's a commitment they made in 1969 or thereabouts to be an equal partner, to equally apportion health care expenses in this country. It's a commitment they made not only to this province, Ontario, but a commitment they made to every province and to every Canadian. We all know that when it comes to the federal government, a promise made is a--well, how about that GST?

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We are talking about a national issue. We are not alone in our fight with Ottawa. Every province, whether it is governed today by an NDP government or whether it's governed by Mr Tobin in Newfoundland, a former federal Liberal cabinet minister, or the Parti Québécois, they all say the same thing. They all say that the federal government has not lived up to its commitment. They all are



struggling to reform their respective health care systems to cope with the devastating federal cuts and the increased demand that we are experiencing.

Let me pause for a moment to talk about that increased demand. It is very serious. One need not be a demographer to realize just how serious it is. If we look at spending today, we realize that almost 50% of the funds spent in this province on health care, almost 50% of the \$20-plus billion, is spent on approximately 12.6% of the population. We are all familiar with the fact that the baby boom generation is maturing and aging and that it will not be long until they are over 65. That's the 12.6% today that is utilizing approximately 50% of our health care system. What will be the situation we will have to deal with, and we must deal with, when that group is over 65? Clearly, in order to properly reform this system, it has to be properly funded, and in order to properly fund it, the federal Liberal cousins of the members opposite must live up to their commitments.

I look over to the NDP ranks. Perhaps I should put my glasses on to do that. I hope the NDP friends across the way will see reason, just as their cousins in Saskatchewan and their cousins in Manitoba and their cousins in British Columbia have. Surely we don't have their governing parties in those provinces coming forward to blame health care problems on some phantom conspiracy. No, they don't do that. They have to pay bills and they have budgets to table. In NDP-led provinces across this country, the governments realize that the most urgent problem facing us today is the federal government's unwillingness to do its part.

We have heard back from the federal government, through their ads and through their health minister and the Prime Minister, that in fact they have paid somewhat more. They've done so through cash transfers and points, and so on. I think it's important to look at the facts. I've looked at the federal budget, Budget 2000, and I'd refer you to page 66, table 3.6, and page 129. It says in there: "Only CHST cash transfers are included by the federal government in its list of federal program spending. The CHST tax transfer is not included as federal spending." Very telling indeed. "The revenue from the CHST tax transfer is not included by the federal government in its list of federal revenue." The reference for that is page 60, table 3.5, of the federal budget plan, the very same one.

It's also interesting to consider some comments made by representatives of the federal government. Mr. Rock, when he addressed the Canadian Medical Association, said rather clearly and acknowledged in a very forthright manner that the cuts made by the federal government were significant. He said, on August 20, 1997: "But I am part of the problem, not the solution. It was my government that diminished the size of transfer payments." He said, on the same day to the same audience, "I will not stand here and tell you that the cuts in transfer payments we made were insignificant." I'm still quoting: "They were not and I won't tell you that they have not had an impact. They have."

As soon as one leaves the partisan dialogue that seems to emanate from the members opposite and looks at the facts and considers this in an objective manner, one realizes that the federal government's activity, or inactivity, in this area is nothing short of scandalous.

**Mr Michael Gravelle (Thunder Bay-Superior North):** I'm happy to join the debate tonight, to wrap it up, in fact. Just to make a quick reference, if I may, to the previous member's comments, certainly the member for Mississauga East spoke in terms of governments working together, and I think that's exactly what we think needs to happen, rather than the politicization of this whole process, which has become so horrendous and offensive.

The member for Willowdale talked about meeting commitments. We all know that the responsibilities this government has ignored and dropped the ball on in so many areas are something people do not find acceptable as well.

There are a few things we know for sure. I think I can speak on behalf of my constituents of the Thunder Bay-Superior North riding with some accuracy by saying that people do not like the fact that the provincial government is spending \$3 million, and for that matter the federal government is spending substantial amounts of money as well, on an advertising campaign basically each battling the other. I can tell you as a member from northern Ontario that those of us who are terribly frightened by the extraordinary extra costs we pay for health care, in terms of our travel under the northern health travel





grant, would give an arm and a leg to have some of that \$3 million. The people who are running the eating disorders clinic at St Joseph's Hospital out of their own operating funds, who are asking for half a million dollars to truly try to make this program something that can really work in northern, northeastern and northwestern Ontario, would be absolutely thrilled with that half a million dollars. So it's quite horrendous to see this kind of money being spent in this fashion.

People do not like to see bickering and politics being played in this fashion. What they really expect is for governments to work together, to literally recognize that we have a very serious problem here. It's not a political issue that should be bandied about for your perceived benefit, to try to place blame one way or the other.

It's very difficult when the province won't even take responsibility for the decisions it has made that have damaged our health care system so horrendously over these past five years. I believe the federal government must contribute more money through transfer payments. I've said it publicly before and I'll say it again; there's no question about that. But for this government to remove itself from its responsibilities in terms of the deterioration in the health care system is quite frankly shameful, it's dishonest and it's cruel.

**Mr Crozier:** And it's whining.

**Mr Gravelle:** And it certainly is whining as well.

Let's begin with the reason all this started back in 1995 when this government was first elected. The decision was: "We are going to make tax cuts our big priority. How are we going to pay for that? We're going to pay for that by going after the health care system." One of the first things you did was to remove \$800 million from our hospitals. You made a huge decision to remove \$800 million from our hospitals. You laid off 10,000 nurses. You left us with emergency rooms that were clogged, where people could not receive the service. You made that decision to pay for your damn tax cuts. There's a time and a place, but in 1995 that's what you did. You made a mistake, you know you made a mistake, but now you're trying to shift the blame to the federal government.

The fact is, you can't keep passing the buck; you can't. This is a government that literally received a big chunk of change last year and hasn't even spent the money. Again, we would love to have that money in our health care system.

*Interjection.*

**Mr Gravelle:** You haven't, and you know you haven't.

Let's talk about the decisions that have left people in this province without any confidence any longer that health care is important to the Mike Harris government. This is really what this debate should be about. Ultimately it ends up being an excuse to further privatize our health care system. We've watched what you've done. You want to privatize our roads, you want to privatize our jails, you're moving to privatize our education system and now you want to privatize our health care system. You're saying you're being forced to do it. We've watched what has happened here, and people aren't being fooled by it. There's no question about it.

Again, just speaking as a northerner, I can only tell you how absolutely frustrating it is to watch what happens to my constituents when they are so desperately in need of health care. Like everyone else in this Legislature, including the government members, and certainly my colleagues, we know what it's like. In my riding, thousands of people do not have a family doctor, do not have a family physician. We know what happens when they call our office because they can't receive the care they're supposed to get in our hospitals. We know that people are being removed from hospitals sicker and quicker, and into a system that you like to talk about as being in place, that wasn't in place. You simply didn't have the system in place. You know you made an absolutely huge mistake, and that's been a disaster. People are frightened and people are very concerned. To simply try and shift the blame when you should be bloody well working with the federal government, recognizing that indeed it's a partnership--quite frankly, there's been a long history in our country where that's taken place. You choose to simply make it into a





political football. It's truly irresponsible, and it's not what people expect. I think they do expect you to work with them.

2120

If I may speak as the member for Thunder Bay-Superior North, I know what it's like for people in Nipigon, Red Rock, Schreiber, Terrace Bay, Marathon, Geraldton, Longlac, Nakina, Beardmore and Jellicoe, all the communities, and certainly my community of Thunder Bay, when they have a member of their family who is very sick, who cannot receive health care in Thunder Bay, cannot receive health care in their own community hospitals, and they have to go down to Toronto and are paying thousands upon thousands of dollars continually because that's all they can get. There's a northern health travel grant in place that does not remotely adequately meet the needs of those people, yet we've seen this government actually take the amount of money they put into that from \$13 million to \$7 million. Again, you should put the money back into that system.

We see those extraordinary frustrations. We recognize that you sit here every day and try and build this into a political issue that I don't believe the people of this province accept or buy at all. You've got to understand that your job is to try and work to improve our health care system and take responsibility for the decisions you've made to destroy our health care system. I notice you are no longer heckling. I think you recognize that we're right when we remind you of your own responsibilities. There's no question there's a shared responsibility and it's got to remain that kind of responsibility, but you can't simply walk away from it yourselves because your priorities are somewhere else.

You talk about doing more for less. In the health care system, I'm not sure we can do it that way. We need real changes in our health care system. The answer was not to simply destroy our hospital-based system before you had a community care system in place. You know that you can't simply talk in terms of all the things you say you're going to do if you're not going to really put the money in. You can't talk about the money that you need when you aren't even spending the money you have and when you've got your priorities all wrong. It's incredibly upsetting.

We've looked at our mental health system, which I think is in a terrible state, and the closure of our psychiatric facilities. I know the Lakehead Psychiatric Hospital is still scheduled to close. But before you did that, what did you do? You removed hundreds of beds, and we do not have nearly enough psychiatrists. What you've done ultimately is that you've put people who need mental health services and help in our jails. They're ending up in our jails because the services aren't there. I'll be honest with you: The changes to the Mental Health Act concern me as well. When we start talking about community treatment orders, one of the worries I have is, what will we do if there's no place for them to go? What if the community supports aren't in place? The answer is not to put them into jails, but you have done that as well.

You made some decisions in terms of saving money. You're going to cut beds. We've lost a lot of the services that are supposed to be there. You made those decisions quite deliberately to simply pay for your tax cut, and I don't think people accept it.

If I may, before my time runs out, I want to make very specific reference to the eating disorders clinic at St Joseph's Hospital. This is an extraordinary service. I will recognize and acknowledge that not everybody understands the value or the importance of this particular program. The fact is that eating disorders have the highest mortality rate of any sort of psychiatric disorder--it's something people don't realize--either through suicide or simply the disease itself actually killing people. It's incredibly important.

We've been fighting for over 10 years now in Thunder Bay to try and get support from the province to properly fund this program. We've had excuse upon excuse. We've had campaigns. We've had petitions. We've had extraordinary letters. We had a press conference a month or so ago with Dr Geoff Davis, the chief of staff, and Dr Ron Davis, the psychiatrist in charge of the program, and the wonderful staff there, begging the province to do something. We've written letters upon letters to the minister asking for help. We're looking for about \$500,000. We got an answer back from the Minister of Health, and I will read part of it, which is quite astonishing: "The majority of funding allocated to eating disorder treatment in



the last few years has been allocated to increase specialized treatment services for adolescents with eating disorders in parts of the province where the need is greatest."

In other words, "You're not getting it, because we don't think the need is that important in Thunder Bay or northwestern Ontario." It's another one of the examples of why we feel so frustrated and so upset. The same situation exists in Sudbury, by the way. They're also desperately trying to get that kind of help. They have chosen to fund other parts of the province. They told us they were going to provide the funds basically as a result of mental health restructuring. To some degree we accepted that, at least recognized there was a certain consistency to that when we were first given that answer, but then we discovered that there was funding being given to various parts of the province, clearly where they think the need is the greatest.

So when we listen to this government talk about priorities and where they think the need is the greatest, those of us in northern Ontario, for a variety of reasons, feel as if we're sometimes pretty much left out of the loop, and we sure don't think that's right. I believe it's my obligation as a representative from Thunder Bay-Superior North, and I know you feel the same way, to fight on behalf of our constituents to recognize that we get the same treatment.

It's astonishing to go and talk to people who are either suffering from an eating disorder or have family members who are suffering from a disorder and to really understand the impact this has, to recognize you have St Joseph's care group, which is concerned enough to take funding out of their own operating budget in order to maintain the program at the level they are, but to have the province come back and tell us that they do not think it's necessary or worthy of funding because they don't think the need is there, when indeed we can prove that it is there--tragedies are happening. It's completely frustrating to be a part of that.

There's issue upon issue where that happened. To have to stand up here and spend our time in debate, which is the simple politics of a blame game, I know, and I think everybody in this Legislature knows, that is not what the people of this province want to be talking about. They want to find some solutions. They recognize that there's a need for some solutions, and it certainly isn't going to be simply by pointing fingers. We will not stand for that. I will not stand for that as a member of provincial Parliament. I intend to fight for what I believe my constituents need and deserve, and I will continue to do that as long as I can stand here and get an opportunity to speak. We have to continue to deal with the reality that these are complex issues, there's no question about it. Health care reform itself is complex, but it's not going to be solved by simply finger-pointing, by saying we cannot carry on, by threats of privatization, because that is one of the fears that we have.

The threat of privatization is indeed the road down which this government seems to want to go. We have seen example upon example that when the government has chosen to privatize, the costs have increased. But it's an ideological bent we're on. It's more difficult to get them to listen and to understand. We've even proven, example upon example, where this privatization has cost more. We've seen more and more delisting of services. We've seen more and more examples of that happening. So it's very important to us that we continue to fight this fight. I hope I get another opportunity to continue my remarks at the next stage.

**The Acting Speaker:** It being 9:30 of the clock, this House stands adjourned until 1:30 of the clock tomorrow.

*The House adjourned at 2129.*







# Ontario Hansard

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1st session, 37th Parliament | 1<sup>re</sup> session, 37<sup>e</sup> législature

Mon 10 Apr 2000 / Lun 10 avr 2000

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## ORDERS OF THE DAY

Health care funding, government notice of motion number 32, *Mr Harris*, Mr Bryant, Ms Churley, Mr Wettlaufer, Ms Di Cocco, Mr Gilchrist, Mr Crozier, Mr Bisson, Mr DeFaria, Mr Young, Mr Gravelle

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# Ontario Hansard

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1st session, 37th Parliament | 1<sup>re</sup> session, 37<sup>e</sup> législature

Tue 11 Apr 2000 / Mar 11 avr 2000

*The House met at 1330.*

*Prayers.*

## MEMBERS' STATEMENTS

### SUPPORT FOR AGRICULTURE

**Mr Ernie Parsons (Prince Edward-Hastings):** My statement today is directed to the Premier and the Minister of Agriculture.

I'm only too aware that the cuts to OMAFRA offices have taken place and are now complete. The second-largest industry in Ontario has been dealt a blow. However, I believe that a responsible government is one that recognizes its mistakes and corrects them. I believe this is just such a situation. I'm aware that literally thousands of individuals have signed petitions and sent them to the Premier and minister, imploring them not to make the cuts. These signatures aren't from people unfamiliar with the situation; these are farmers who know only too personally what these cuts will do to their farms, their families and their communities. I will be sending some of these petitions over to the minister shortly.

It goes without saying that this government listens, and listens well, to suggestions coming from large industry. The attendees at the numerous fundraising functions bear testimony to that. I applaud this listening, but farmers are businesses too and are true experts in their calling. They deserve better treatment and more respect than they are currently receiving.

My perusal of the media every day clearly shows that the Premier thrives on being present at the expansion or opening of a new industry. I challenge the Premier to just once excuse himself from his Bay Street friends for a day and attend the auction sale of a farm going out of business. I think the suggestions and comments he would hear from these farmers would be informative and interesting.

### NATIONAL VOLUNTEER WEEK

**Mr Ted Arnott (Waterloo-Wellington):** As you know, this is National Volunteer Week, and I'm honoured to support the people who enhance our quality of life in their communities as volunteers. I'm equally honoured to speak on behalf of the volunteer action centre which serves the Kitchener-Waterloo area and on behalf of my honourable friend the Minister of Health who was also invited to speak today.

This year's theme is the history of volunteering. In my new riding of Waterloo-Wellington we appreciate the historical role that volunteers have played in forming the social fabric of our towns and cities. I would especially point to the contributions of our service clubs, which have helped make our communities so strong. Men and women serve in clubs such as the Lions, Rotary, Optimist, Kinsmen and Legion, to name a few.

I cherish my own volunteer experience as a Big Brother. I had a Little Brother from 1987 to 1990, when



he turned 17 and the program officially ended. Shortly after, I was elected to the Legislative Assembly--that would be in 1990--and I carry with me to this day fond memories of being a friend and mentor to someone who lacked the example of a positive older male role model. I continue to serve the Arthur area of Big Brothers as an honorary member of their board, and I strongly encourage involvement in this very worthwhile cause.

By looking back on how volunteering has formed ourselves and our communities, we can look ahead to even greater contributions by volunteers everywhere.

#### **PROPERTY TAXATION**

**Mr Mario Sergio (York West):** Sooner or later--and I would prefer to see it sooner than later--the Premier and his government will have to deal again with the issue of property tax reform. At the end of this year, the Band-Aid is going to come off, and I want to know, the homeowners in Toronto want to know, the seniors throughout Ontario want to know, the small business community wants to know, what you, Premier, are going to do. Are you going to work with the various groups, organizations and interested parties or are you going to apply another Band-Aid and continue with your patched-up job for another three years? A responsible Premier would bring some stability and fairness to the system now.

Let me tell the Premier that seniors are being pushed to the wall, and they will react. They are facing a possible 61% property tax increase, and they will not put up with it. They will unite, they will organize and they will revolt. They will make their voices heard. It is an issue the government will have to deal with, sooner rather than later.

#### **NATIONAL VOLUNTEER WEEK**

**Mr Wayne Wettlaufer (Kitchener Centre):** Yesterday marked the beginning of National Volunteer Week, a week set aside to mark the outstanding contributions of volunteers in communities across Canada.

I know that volunteers make an immeasurable difference each day through their generous donations of time and talent, toward the betterment of our communities.

My own riding of Kitchener Centre, indeed all of Waterloo region, is fortunate to have many thousands of dedicated volunteers who donate hundreds of thousands of hours to support community projects, assist the less fortunate and welcome newcomers. Others aid the police, ambulance and fire services. Still others volunteer to coach, officiate or organize the many sports activities available to children and adults throughout the region. The arts community also benefits greatly from the work of volunteers who provide instruction, venues and encouragement to the many amateur theatre groups, choirs and bands in the area.

There are a few individuals among those many thousands whom I want to cite for their long and distinguished volunteer service to the Kitchener-Waterloo community. They are Eli Boich, Al Lucas and Ab Kropf, who have given unstintingly of their time and talent to the volunteer program at Freeport hospital. Frank Voisin, who has given freely of his time and money to our community, particularly in the area of health care, and the late Peter Hallman, who could be found at almost any time and place where he could be of help, are also worthy of note.

Several organizations should also be mentioned. They include the Kitchener-Waterloo Multicultural Centre and the K-W YMCA host program, the German-Canadian Business and Professional Association, and the K-W Oktoberfest Committee.

Mr Speaker, I invite you and all members of this Legislature to join me in saluting all of Kitchener-Waterloo's many volunteers, without whom our community would not have developed into the wonderful, welcoming and caring city that it is.

#### **OFFICE OF THE WORKER ADVISER**





**Mr Steve Peters (Elgin-Middlesex-London):** It was with great interest that I heard the comments made by the Minister of Labour yesterday regarding the Office of the Worker Adviser. The minister took great pains to emphasize that despite the 5% downsizing in all ministries, on top of all previous cuts, the minister is looking at increasing front-line services to the good workers of Ontario. They claim that they are both economizing and creating efficiencies in a program that is seriously deficient. It is clear that the minister is attempting to sugar-coat a program that is underfunded and understaffed.

For the last 13 months our local Office of the Worker Adviser has been short one full-time case worker. They have been informed that this position will not be filled. The backlog is at least six months before they will even open your file. Front-line staff have been told of a pending province-wide reorganization and that they can expect layoffs in the very near future.

My office has found that 90% of the clients forced to seek assistance through these offices are in dire financial straits, and most are ineligible for interim social assistance.

One can't help but think this is another one of the Tories' ill-conceived plans that will negatively affect those the minister claims are such valued and treasured friends of this government.

The Minister of Labour should be forewarned that those on this side of the House will be closely monitoring any changes to the Office of the Worker Adviser, on behalf of all the injured workers in this province.

#### EDUCATION FUNDING

**Mr Rosario Marchese (Trinity-Spadina):** Over the weekend I read an interesting article on education. One Scarborough parent, Sylvia Menezes, decided that enough is enough. "Fed up with the need for parent volunteering and fundraising because of funding cuts to education, Menezes would like parents across Ontario to stop all such efforts." I agree with her. It's for that reason my statement is related to this.

What parents are doing across the province through their volunteer efforts and their fundraising is making up for the failure of the funding formula of this province, and if parents don't stop they will continue to absorb and be a foil for the cuts of this government. That's what's happening. They're obviously clueing in that this is the result of the funding cuts, forcing more and more people to fundraise for essential things, and that is fundamentally wrong.

It's for that reason that when you underfund the education system, the Youth News Network, a corporate body, is interested in entering the student market, because they know that if they have a captive audience they can sell not just the news but their commercials to those students. That's why my bill is intended to ban such things. I urge people across the province that if they support such a banning of the Youth News Network, to let me know, but more importantly, to let them know as well.

1340

#### FRIENDSHIP SERIES HOCKEY

**Mr R. Gary Stewart (Peterborough):** On the weekend of March 31, some of my colleagues and I travelled to Quebec to play hockey in the friendship series. The teams were made up of representatives from the National Assembly of Quebec and our own Ontario Legislature, including three former MPPs from the previous government.

On behalf of the team, I would like to sincerely thank the Quebec assembly for the hospitality and fellowship we were shown throughout the weekend.

This year, Molson's Cup went to Quebec for their outstanding hockey play. Ontario has been the winner of the cup for the past two series.

During the two-day event, a charity game is also played, and this year the game was played to raise





money for the minor hockey association of Loretteville.

On behalf of our team, the Legiskaters, I would like to thank all three private hosts, Molson's Inc, Bell Mobility and Kruger Inc, for their support. Without their support, the series could not happen. I would also like to thank the elected council and the mayor of Loretteville. As well, thanks to MPP Morley Kells and his assistant, Bob McAllister, for their organizational expertise.

The friendship series is a wonderful opportunity to promote diverse cultures and different governments. I am very proud to be part of this interprovincial initiative.

#### **FAMILY RESPONSIBILITY OFFICE**

**Mrs Marie Bountrogianni (Hamilton Mountain):** Citizens of Ontario are voicing their concern with the Family Responsibility Office backlogs across the province. I have cases on a daily basis in Hamilton Mountain which show the FRO's inability to properly address their workload and manage the responsibility placed upon them.

Catherine first came to my office in October 1999 when she did not receive a payment for the month. Catherine was told by the FRO that she would not be getting any further payments until February 2000. Due to the slow response time of the FRO in changing a court order, an overpayment occurred on Catherine's account. Catherine has two children and she was left for six months without support payments because of FRO delays and mismanagement.

Kevin brought his case to me in January 2000. He noticed a discrepancy in his payment that showed a miscalculation of his arrears in the amount of \$1,800. His situation was further complicated by the fact that he had to pay an additional \$600 support payment that he should not have had to pay. He went to court, he couldn't afford a lawyer and, as a result, was forced to pay twice in one month. The paperwork was not immediately registered and the change was not made until four months later.

Caroline came to me in March of this year. Her case is currently \$32,000 in arrears with the FRO, and after intervention from my office, she has only now started to collect \$750 a month.

The lack of speedy action when dealing with case information affects the lives of innocent children. Caroline has two children, one who is disabled. Why are these types of situations still occurring? Why is the government not willing to stand up and take responsibility for ensuring that the FRO is held accountable?

#### **MEMBER FOR OTTAWA CENTRE**

**Mr Steve Gilchrist (Scarborough East):** On the eve of what is certain to be a historic showdown between the Toronto Maple Leafs and the Ottawa Senators, I would like to take this opportunity, in the spirit of non-partisanship and of friendly intercity rivalry, to congratulate the member for Ottawa Centre for his recent intervention on behalf of his hometown team.

A piece by Sun media columnist Steve Simmons, poking fun at the Ottawa Senators, was met with a swift, vehement and voluminous response from Ottawa fans, including the member for Ottawa Centre himself. According to Mr Simmons's column today, the member left him a voice mail message in which he said, "I can't believe you'd write this kind of"--expletive deleted. For the sake of parliamentary propriety, let's just call it "horse hockey."

When the member saw that his beloved Sens were under attack, did he heed the time-honoured warning given to all politicians, "Don't argue with people who buy printers' ink by the barrel"? No, he did not. In fact, the member upped the ante considerably by promising to follow up his voice mail with a similar call to Mr Simmons's publisher. The member is truly a credit to a city known more for contract-breaking Russians, dot-com companies and generally low levels of fun than it is for high levels of testosterone.

But where, oh where, is Mr Patten's commander-in-chief? Once again, Dalton McGuinty, himself the MPP for Ottawa South, is not even dressed for the game, much less in the corners. Perhaps he is so



much in the thrall of American think-tanks that he has forgotten the importance of what goes on at Canadian rinks.

**Mr John Gerretsen (Kingston and the Islands):** On a point of order, Mr Speaker: I would ask for unanimous consent to allow the member from Nepean, the honourable Minister of Community and Social Services, an opportunity to respond to that last statement.

**The Speaker (Hon Gary Carr):** Is there unanimous consent? I'm afraid I heard a no.

**Mr Peter Kormos (Niagara Centre):** On a point of order, Mr Speaker: I seek unanimous consent for members to wear this pin that says no to American corporate, for-profit private jails here in the province of Ontario.

**The Speaker:** Is there unanimous consent? I'm afraid I heard some noes.

## INTRODUCTION OF BILLS

**MINISTRY OF CORRECTIONAL SERVICES AMENDMENT ACT (PUBLIC OWNERSHIP AND STAFFING), 2000 / LOI DE 2000 MODIFIANT LA LOI SUR LE MINISTÈRE DES SERVICES CORRECTIONNELS (PROPRIÉTÉ PUBLIQUE ET DOTATION EN PERSONNEL)**

Mr Kormos moved first reading of the following bill:

Bill 61, An Act to amend the Ministry of Correctional Services Act to require public ownership and staffing of correctional institutions / Projet de loi 61, Loi modifiant la Loi sur le ministère des Services correctionnels pour exiger la propriété publique des établissements correctionnels et leur dotation en personnel.

**The Speaker (Hon Gary Carr):** Is it the pleasure of the House that the motion carry? Carried.

The member for a short statement.

**Mr Peter Kormos (Niagara Centre):** This bill amends the Ministry of Correctional Services Act. It requires every correctional institution to be owned and operated by the crown in right of Ontario. It requires all work done for or on behalf of a correctional institution to be done by civil servants. This bill will ensure the safety of our communities and protect us from American private, corporate for-profit jails.

## MOTIONS

### PRIVATE MEMBERS' PUBLIC BUSINESS

**Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader):** I believe I have unanimous consent to move a motion without notice regarding the order of precedence for private members' public business.

**The Speaker (Hon Gary Carr):** Is there unanimous consent? Agreed.

**Hon Mr Sterling:** I move that notwithstanding standing order 96(d), the following change be made to the ballot list for private members' public business: Mr Gerretsen and Mr Kwinter exchange places in order of precedence such that Mr Gerretsen assumes ballot item number 43 and Mr Kwinter assumes ballot item number 20.

**The Speaker:** Is it the pleasure of the House that the motion carry? Carried.

## ORAL QUESTIONS

### WATER EXTRACTION





**Mr Dalton McGuinty (Leader of the Opposition):** I have a question today for the Chair of Management Board. It was my understanding that he would be here.

**The Speaker (Hon Gary Carr):** I'm just wondering--I'm looking for the Deputy Premier. Is the Chair of Management Board expected to be here?

**Hon Ernie L. Eves (Deputy Premier, Minister of Finance):** He is coming.

**The Speaker:** Maybe the member would like to stand the question down and go into his second question.

**Mr McGuinty:** Thank you, Speaker. I have a question to the Minister of the Environment.

It may be cold outside today, but I believe that if we don't start doing something about this now, this summer is going to be a disaster for Ontario farmers and tourism operators. We already have reports that Lake St Clair in Essex county is three feet below normal, and there are fears that this summer is going to produce the lowest level in both Lake Erie and Lake Ontario since the previous record low established in 1935.

On behalf of tourism operators and on behalf of farmers, Minister, I am asking that you agree to immediately re-impose the moratorium on new water-taking permits that you quietly removed shortly after the election.

1350

**Hon Dan Newman (Minister of the Environment):** I refer the question to the Minister of Natural Resources.

**Hon John Snobelen (Minister of Natural Resources):** I and my colleague the Minister of the Environment and my colleague the Minister of Agriculture and others who are affected by low water levels have been working on this subject for a great length of time. We are looking at the regulations we have in place and at some of the responses we can make with our partners, the conservation authorities and municipalities across Ontario, and we will be prepared, this year and in future years, to respond to drought conditions.

**Mr McGuinty:** Minister, you are fiddling while the water is disappearing. What I'm asking on behalf of farmers, and tourism operators in particular, is really something very simple. They have a very straightforward request. They are very concerned, given the natural conditions that have prevailed during the past winter, given the record low levels of water, and are asking that you simply reimpose a moratorium on all water-taking permits. Those are being issued on a regular basis now. We're not charging for the water that's being removed. We'll set aside that issue for another day. But at the present time, why would you not reimpose a moratorium in order to lend some greater sense of security to our farmers, who are very concerned about not having enough water to water their crops this coming summer?

**Hon Mr Snobelen:** I thank the Leader of the Opposition for the question. He, as always, has done his best to make a very complex issue very simplistic, as opposed to simple. He is suggesting that one very small component of water use in Ontario is the answer to a problem that is much broader than that.

The government of Ontario will be responding very soon with the Ontario Drought Response 2000. It's a comprehensive response. It looks at how we've managed drought in the past and how we should manage it in the future. I can tell you, it's a subject we take much more seriously than the question from the Leader of the Opposition would suggest.

**Mr McGuinty:** Minister, unlike you, I would rather avoid a crisis than help create it. The Ministry of the Environment is still granting permits for companies to draw water. When this is done, one of the problems is that no one locally is being notified in any real sense about the possibility that a





water-taking permit is to be granted to somebody in their community. There is no requirement at the present time that they be notified in any direct sense and allowed an opportunity to provide real opinions and express real concerns about the potential water loss in their community.

This happened just recently in Hastings county, where you snuck through permits to allow a company to take 1.7 million litres of water a day out of the local supply. Farmers in that community are extremely worried, first of all that they weren't notified about this, and they didn't have an opportunity to offer their input. They're concerned that they're going to run out of water this summer. They're concerned there is not going to be enough water for their crops.

Minister, once more, on behalf of those farmers and farmers throughout the province, will you not reimpose a moratorium on all water-taking permits?

**Hon Mr Snobelen:** Once again I think the research folks who help the Leader of the Opposition have failed him. They have not provided him with all of the information, because if they had provided him with all of the information, he would know that there are conditions attached to those sorts of permits, there are time limits attached to those sorts of permits, and he would also know that we have been working on a cross-ministry basis, with the Ministry of Agriculture working on behalf of the farmers in this province, with the Ministry of the Environment worrying about water quality certainly and the Ministry of Natural Resources, working together with our municipalities and our conservation authorities for a comprehensive drought plan for this province. That's the responsible way to deal with local planning on an issue that's important to every person in the province of Ontario.

#### ONTARIO REALTY CORP

**The Speaker (Hon Gary Carr):** Leader of the official opposition, the Chair of Management Board is now here.

**Mr Dalton McGuinty (Leader of the Opposition):** Thank you, Speaker. I have a question again to the Chair of Management Board. Minister, on behalf of Ontario taxpayers, we're wondering about the involvement of lobbyists in a sale of Ontario lands to the Ontario Realty Corp. The way I see it, it's kind of like if we want to sell our homes and we hire a real estate agent. We simply want our real estate agent to get the best possible offer. We don't want our agent, the ORC, to be wined and dined. We don't want people to attempt to influence their judgement and their decision-making authority when it comes to the sale of land. We simply want the best possible offer.

We know that so far the ORC, under your management, has lost over 10 million taxpayer dollars. I want you to stand up and tell us why you believe it is in the interests of Ontario taxpayers that lobbyists have a role, of any kind, to play in the sale of government lands.

**Hon Chris Hodgson (Chair of the Management Board of Cabinet):** We've taken action to make sure that the process around the sale of assets of the Ontario government is more accountable, more open and more transparent. You can check out those new policies on the Web page. This is what your board of directors at the Ontario Realty Corp has done. They take their role very seriously.

Secondly, you keep referring to your information, that you assert as a fact, that Ontario taxpayers have lost dollars they should have gotten through some of these transactions. What do you base that on?

**Mr McGuinty:** We went to the Web site and we found, when you look at the lobbyist registration records for the ORC, there are 26 lobbyists registered to influence matters. That's what they do. They're very open about it. They want to influence matters that take place at the ORC. One of those lobbyists is Bill King, former executive assistant to Mike Harris. He very openly says, in his lobbyist registration information, that he has an interest in Ontario Realty Corp's designated surplus properties.

Again, I'm just trying to figure out, if we compare ourselves to homeowners, why do we want our real estate agent, somebody who is supposed to act exclusively in our better interests, to be wined and dined by lobbyists? Don't we simply want the best possible offer? Isn't that what talks loudest and most eloquently, the best possible offer, the highest price? Tell me, why is it in the interests of Ontario



taxpayers that lobbyists be allowed to play some kind of role, any kind of role, in the sale of government lands if the overriding objective here is to get the best possible price?

**Hon Mr Hodgson:** I think the Leader of the Opposition reflected our policy quite accurately. We are interested in getting the top price for our property. That's why the board of directors of the Ontario Realty Corp, which was unanimously approved by this House through its proper process, set up a new process for the dispersal of assets, which requires a more open and transparent way of doing business.

It was our government that brought in the lobbyist registration. We want to conduct our business in a more open and accountable fashion. For you to stand up here and say that somehow that's not right--I understand your government wouldn't bring in the lobbyist registration; our government did, so that that would be out in the open.

**Mr McGuinty:** Minister, you're continuing to duck a very simple question. I believe that lobbyists should have no place whatsoever when it comes to the sale of Ontario government lands. I think the only issue here is who's going to come up with the best offer. That's what Ontario taxpayers want.

My colleague Dominic Agostino has tabled a bill. Among other things, it would prohibit the involvement of lobbyists when it comes to the sale of Ontario government lands.

Minister, I've got a very simple question for you again. Tell us: Why is it in the interest of Ontario taxpayers that lobbyists be involved in the sale of government lands? It's a simple question, it's a direct question, and so far you have failed to answer it.

**Hon Mr Hodgson:** We have acted to make this process more accountable and open and fair. All properties that are for sale now are listed on the Internet. We're using professional brokers, through a request for proposals, to qualify them that they are capable of selling this property, and it's done in a more transparent way to try to maximize the value that the taxpayers will receive.

Your "lobbyists"--I don't know how wide you want to spread that. Does that mean that members from your party can't phone the Ontario Realty Corp to ask for information regarding a certain piece of property that's for sale?

1400

## NURSING HOMES

**Ms Frances Lankin (Beaches-East York):** My question is to the Minister of Health. Under the law, you're responsible for ensuring that nursing homes comply with legislated standards in order to have their licences of operation renewed.

Recently I received some information that there are nursing homes in this province that did not see a government inspector for over two years. Nursing homes are required by the Nursing Homes Act to have their licences renewed every 12 months. The ministry in the past has done an annual inspection to make sure they are meeting all the standards contained in the Nursing Homes Act.

In light of the information I have received, I've done a very preliminary search of inspection reports on nursing homes. I want to give you some examples of what I found. Prior to 1996, White Eagle Nursing Home in Toronto, Extendicare in St Catharines, Wellington House Nursing Home in Prescott and Westgate Lodge Nursing Home in Belleville were inspected annually. An inspector was in there once a year at a minimum; often, with referrals and follow-up reports, two or three times a year. Between 1996 and 1999, none of these nursing homes saw a single inspector, Minister. How do you explain this?

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** If the member would share the information with me, I would certainly follow up and obtain whatever answers are necessary.

**Ms Lankin:** I appreciate that and I want to try and explain the situation to you, because I've spoken to sources in your ministry and in the community who tell me this story: that you in fact took the





compliance officers, the people who did those annual inspection reports, out of their jobs and reassigned them to work on long-term-care projects that kept being reannounced and reannounced over and over again. Meanwhile, there was no one conducting annual inspections from about the middle of 1996 through 1997 and 1998. The people living there were left completely vulnerable for over two years. For over two years, you neglected your own legal responsibility. For over two years, you neglected your moral responsibility to tens of thousands of frail seniors and their families.

Minister, how do you defend this?

**Hon Mrs Witmer:** Again, if the member would be prepared to share the information with me, I certainly will follow up with ministry staff and get the answers that are required.

**Ms Lankin:** Minister, I'll give you the list of homes, the four or five I read out plus a dozen or so that we've looked at, but I suspect, and what I've been told is, that if you look at the reports from right across this province, you will find that this is a consistent story. We have all heard the horror stories from nursing homes. Families count on the fact that each year the licences are renewed, that the nursing homes have to meet certain standards in order to get their licences renewed and that they're inspected to ensure they have met those standards. The law requires that families be able to see those annual inspection reports posted in the homes. However, under your management of long-term care, instead of annual inspection for compliance, your record is an inspection every three years.

I want you to look into this. I want you to come back to us. I want you to admit to your failure in protecting seniors in nursing homes, and I want you to commit that in the future every nursing home will once again be inspected annually before their licence is renewed by the Ministry of Health.

**Hon Mrs Witmer:** I appreciate the fact that you are going to share the information with us. If you had had the information prior to this, I would have been pleased to follow up, and I certainly will make sure that ministry staff are doing what ministry staff are supposed to do.

#### CORRECTIONAL FACILITIES

**Mr Howard Hampton (Kenora-Rainy River):** My question is for the Minister of Correctional Services. It's about your plan to privatize jails and the safety of our communities. We've learned that Corrections Corp of America, a company you are negotiating with to run one of your superjails, has filed for bankruptcy protection in the United States. Communities in the United States have already been dragged through hell and back with riots, murders and escapes in Corrections Corp jails. Now they're wondering, what happens when this company goes bankrupt? What about here in Ontario, Minister? When you contract with a private, for-profit American company to run one of your superjails, what are you going to do when it goes bankrupt?

**Hon Rob Sampson (Minister of Correctional Services):** The leader will know that the initiatives we've brought forward in corrections reform were primarily a response to the auditor's report in 1993, which focused on the operation of correctional facilities when you were in government.

His comment was that the correctional facilities in this province were the second highest in cost in the entire North American system of correctional facilities and that we were getting poor results. We took up the challenge in 1995 to reform the correctional system in this province so that we could get better results through the correctional dollars we're spending, get more efficient facilities, safer facilities, more secure facilities that are state-of-the-art as they relate to the protection of the citizens of this province.

That's the focus of this government as we go forward, perhaps partnering with the private sector operator as well: the safety and security of the people who live in those communities and the people who work in those facilities.

**Mr Hampton:** Minister, the reality is that you're turning jails into American-style dungeons for dollars. Let's look at what's happened in the United States. The reality with Corrections Corp is that you have poorly trained, non-professional staff looking after some of the highest risk offenders. It's been a disaster in the United States, and communities have been left to pick up the pieces.





That's why the gallery is full of people today from Ontario communities who don't want any part of the American private jail strategy. That's why my colleague Peter Kormos has introduced a private member's bill to stop your American privatized jails.

Minister, will you listen to these people who don't want the American experience? Will you assure them that you'll support Mr Kormos's private member's bill so we don't have the American experience of escapes and murders and untrained people looking after an important community security question?

**Hon Mr Sampson:** I think the people in this province are interested in a correctional facility and a corrections system in this province that gets results. I don't think they're interested in a correctional facility and a corrections system in this province that has an 80% recidivism rate. I don't think they're interested in those types of results when we have the second-highest-cost system in North America.

It's quite clear that the way in which we run correctional facilities in this province has to change. You weren't prepared to do that. You were prepared to accept poor results and high costs when you were the governing party in this province. We are not prepared to accept that. That's why we will be establishing, for the first time, standards that we will challenge all institutions, whether they are publicly run or privately run, to meet or exceed. These are standards that deal with safety, that deal with security, that deal with effectiveness and efficiency. These are standards you turned a blind eye to, and we won't.

#### VISITOR

**The Speaker (Hon Gary Carr):** Perhaps we could stop the clock for a quick moment. In the members' gallery west we have a former member, Greg Sorbara, who was the member for York Centre in the 35th, 34th and 33rd parliaments. Welcome to our friend.

1410

#### HOSPITAL FUNDING

**Mrs Lynn McLeod (Thunder Bay-Atikokan):** My question is for the Minister of Health. Minister, yesterday you stepped in and took over the Hamilton hospital and you took personal responsibility for making cuts to hospital services in Hamilton. The consultant you sent in to Hamilton said that the hospital board had placed a higher priority on meeting patient needs than on getting rid of their deficit. The consultant said that you should go in and you should take responsibility for making sure they shut down an emergency room, an operating room and 95 more beds.

More than half of the province's hospitals are facing deficits and your ministry has told them that they have to balance their budgets, but they can't cut any programs. You've promised them a new funding formula and you've told them not to expect any more money. That means cuts are going to have to be made somewhere, somehow.

Minister, you've decided to go into Hamilton and take responsibility for making the cuts yourself. Are you now going to go into other hospitals with deficits? Are you going to London and to Ottawa? Are you going to go into Sunnybrook and into Windsor Regional Hospital and make the cuts yourself, just the way you're doing in Hamilton?

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** If the member has--and perhaps she has--taken the time to read the report that was prepared by the independent third party, PricewaterhouseCoopers, she will see that the indications were, as a result of the information that had been collected, that there were some serious issues that had been identified by the third party in the consultant's report, which had to do with a matter of public confidence in the hospital and also a lack of confidence in the management and the governance as far as carrying out and implementing any recovery plan.

In fact, let me quote from the review. On page 36 it says: "A common theme has been why things cannot be changed rather than what can be changed. This attitude has created paralysis within the organization."



Again, the consultant also said--

**The Speaker (Mr Gary Carr):** Order. I'm afraid the minister's time is up. Supplementary.

**Mrs McLeod:** Thank you, Minister, and we could spend time reading the parts of the report that reflect our concern. My concern is that the consultant believes the hospital services board should be more concerned with their responsibility to you, as minister, and your budget cuts than they are to meeting the health care needs of the people in their community. I believe that's wrong. I believe that's the wrong priority for hospital boards.

You want to say that this isn't about money; it is about money. It's about the fact that your government cut \$800 million from hospital budgets and that half the hospitals in this province are facing deficits, not just the Hamilton health services board. You're going to have more hospitals facing deficits this year because you're not prepared to put any money into covering wage settlements. The only way hospitals in this province can meet your order to balance their budgets is to start to cut programs, to lay off staff, to shut down programs, like the HIV/AIDS clinic at Sunnybrook.

We've now seen what will happen. If a hospital board says they can't make the cuts you want without hurting patient care, you're going to come in and make the cuts for them. Today you have left hospital boards across this province with only two options: They either make the cuts you're forcing on them or they let you come in and make the cuts for them. But I suggest, Minister, you still have another option left. Will you put more money into hospital budgets and stop the cuts that are going to happen in places like Hamilton, London, Ottawa, Toronto, Timmins, Windsor and Cambridge, to name just a few?

**Hon Mrs Witmer:** Let me be abundantly clear. We have committed more money to health funding in this province than you had ever committed. In fact, we've increased funding from \$17.4 billion to \$20.6 billion this year, and we have an additional 20%--

*Interjections.*

**The Speaker:** Minister, take a seat. Order. The member for Windsor West, come to order, please. We can't have question period when people are shouting at the minister. I must say, if I have to stand up here, I'm sure the cabinet ministers will be very happy. They'll be able to shut their binders and they won't be able to answer any questions. I'm sure they'll enjoy that. If that's what the opposition wants, that's what we will do, because I'm prepared to stand here and I think the pages are as well. If you continue to shout at the ministers when they're answering, we won't continue question period.

Minister of Health.

**Hon Mrs Witmer:** As I've indicated, we've increased funding by \$3 billion and with the promise of 20% more over the next four years; all this at a time when we were asking for their help in getting additional federal funding as a result of the cuts that have been made--\$10 billion to be exact--and your leader refused to sign a letter signed by our Premier and Mr Hampton.

If we want to take a look at hospitals, we have this year increased hospital funding by \$600 million. We have addressed the issue--

*Interjection.*

**The Speaker:** Member for Windsor West, come to order. This is her last warning. We cannot continue if you are going to scream across at the minister. The minister's time was up. New question.

**TEACHER TESTING**

**Mr Ted Chudleigh (Halton):** My question is to the Minister of Education. I have a letter to the editor from the March 23 edition of the Hamilton Spectator and it's from the president of the Taxpayers Coalition Halton, a marvellous organization. He writes that his group strongly feels that teachers should be tested, and I quote from his letter, "Given that children are our most precious resource, should not the





professionals who shape a great part of their minds be periodically tested, as are other professionals?" Minister, how is this government going to ensure that we bring forward an effective teacher testing program?

**Hon Janet Ecker (Minister of Education):** We know in Ontario that we have many, many excellent teachers, but we also know that the challenges they are facing in today's classrooms are getting to be tougher and tougher. Keeping up to date with the knowledge and the skills and the abilities they need is proving to be an increasing challenge.

We are looking at ways we can ensure that all of our teachers will be as up to date and as good as they can be. We're looking at what we can learn from other professions, for example, the quality assurance procedures that are included in the health professions under the Regulated Health Professions Act. We're looking at the recommendations from the Royal Commission on Learning, which the NDP brought in, which talked about the need for certification and re-certification procedures every three to five years. We're also looking at what other jurisdictions are doing around the world in terms of bringing in a teacher testing and evaluation program that allows us to ensure all our teachers will be as good as they can be. That's one of the ways we can help guarantee quality education in this province.

**Mr Chudleigh:** Thank you for that answer, and I thank the minister for her commitment to the quality of education here in Ontario. My constituents, and indeed the teachers in my riding, have asked me what this teacher testing program is going to look like. They are also wondering what the government's response will be to the Ontario English Catholic Teachers' Association, which has stated recently that they will not participate in this testing program.

**Hon Mrs Ecker:** I was quite intrigued by the Ontario English Catholic Teachers' Association position, to refuse to do something when they don't yet know what all the components of it are going to be. It's interesting that the only people who are running around saying that it's going to be some silly little true-and-false multiple choice question process are the unions.

We've been very clear that what we need is a multifaceted approach that clearly recognizes that not only knowledge needs to be assessed, but also skills and abilities and all of the factors that make up good, competent teaching. Simply measuring knowledge--you can have knowledge but it doesn't mean you can teach it. We quite recognize that. It's the same challenge the health professions are facing. It's the same challenge that many other jurisdictions are looking at. We are developing a program in consultation with the College of Teachers and our other partners that is going to recognize the role of the principal as the head of the school. It's going to recognize the role of boards, parents--

**The Speaker (Hon Gary Carr):** Order. I'm afraid the minister's time is up.

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## HOSPITAL FUNDING

**Mr Dominic Agostino (Hamilton East):** My question is to the Minister of Health. This morning, Urmas Soomet, the chair of the board of the Hamilton Health Sciences Corp, called your conduct towards this action you took "duplicitous." I totally agree with his statements on this. You have not been up front with this House and with the public about the report.

You have in your office a recovery plan that outlines cuts that have been recommended that go deeper, further and faster than even the board. Your proposal call outlined that a recovery plan must be submitted with the report. Yesterday in your release you stated that your hand-picked supervisor would put together this recovery plan. The reality is that you have it. You have it in your office. You have seen it, your staff has seen it. You're hiding it from the public, you're hiding it from the people of Hamilton and you're hiding this plan from the Legislature. The reason you're doing it is because you know you're going to own political damage as a result of that plan. You're afraid to go public today. You're afraid because it's going to hurt you in the by-election. As we said yesterday, this is political.

I want to ask you very clearly, Minister, why have you not released the recovery plan that was submitted





to your office at the same time the report was submitted?

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** The member is obviously missing the point. If the member had taken a look at the paper today, there is a quote from the president of local 79 of the Ontario Nurses' Association, Hamilton hospital, who indicates, again supporting the fact that this is not an issue of funding or underfunding, that she has experienced all of the report's criticism. She says: "I've seen it get so bad in the last four years since the merger. I've seen the infighting, the cultural differences between the players." She refers to the fact that the action that has been taken is the appropriate action.

Debbie Mattina, chair of the Save the Henderson Committee, also agrees that this is the appropriate course of action to take.

The action we're taking is based on a third party, independent report, and we are going to ensure that the--

**The Speaker (Hon Gary Carr):** Order. I'm afraid the minister's time is up. Supplementary.

**Mr Agostino:** Minister, I want to go back to you regarding the recovery plan. Yesterday, you led us and the public to believe that there's no plan in place yet and your supervisor is going to do that.

Let me advise you that on Thursday, March 23, two assistant deputy ministers, as well as senior bureaucrats in the ministry, met with three board members and senior staff from the Hamilton Health Sciences Corp to review the recovery plan that had been submitted to your office by the consultants. Again, I want to go back to the political games that you're playing here. You have this plan and you know that this plan recommends cuts that go even further and deeper and faster and are more hurtful than the plan that's submitted by the board.

Again, why aren't you being upfront with us? Why are you not releasing this plan? Why are you playing political games and sitting on this plan in your office? If you were sincere about this, Minister, and sincere about the debate, you would immediately release the plan so we could have an open debate of what you're recommending compared to the board, compared to what the people of Hamilton feel we need.

Why will you not today release the recovery plan that you're hiding? You are trying to protect your political butt for the by-election upcoming in Wentworth.

**Hon Mrs Witmer:** I'm surprised that the member isn't supportive of the Save the Henderson group, that he's not supportive of the workers within the hospitals. The reality is that a supervisor, if appointed, will be the individual who does develop the strong recovery plan. We believe it's very important that any recovery plan that is determined to be appropriate is going to have very strong external and internal stakeholder input, and there has been no opportunity for any strong recovery plan to be provided and to have that type of input from the external and the internal stakeholders.

**PEACE BRIDGE**

**Mr Bart Maves (Niagara Falls):** My question is for the Minister of Transportation. Minister, I know you're aware of the vital importance of the--

*Interjections.*

**The Speaker (Hon Gary Carr):** Come to order. The member for Hamilton East, come to order, please.

**Mr Maves:** I'll try again. My question is for the Minister of Transportation. I know you know the vital link the Peace Bridge provides between Canada and the United States and how important it is for trade with Ontario--

*Interjection.*



**The Speaker:** Member for Hamilton East, last warning. We can't continue on if you're going to yell across when somebody else is trying to ask a question. One more outburst like that and you'll have to go back to your office and you can yell at the TV all you want all afternoon.

**Mr Maves:** As I've been trying to say, there's a vital importance to the Peace Bridge.

*Interjections.*

**Mr Maves:** I understand that the Liberal opposition doesn't care about Fort Erie or the Peace Bridge and the vital importance that it has to trade in Ontario and Canada, but we on this side of the House do.

Last week, as you're aware, an obstructionist court challenge succeeded in delaying a much-needed increase in lane capacity to the bridge. Can you please confirm the Ontario government's support for widening the Peace Bridge with a twin span?

**Hon David Turnbull (Minister of Transportation):** Yes. First of all, I'd like to thank my colleague the member for Niagara Falls and also the member for Erie-Lincoln, Tim Hudak, for bringing this issue very much to the fore. We're very disappointed with the delay in the project. In 1997, the Peace Bridge carried some 7.7 million vehicles, including 1.4 million trucks. It's the second-busiest crossing in Ontario. A binational engineering team found that a twin span is the fastest and the most cost-effective way of expanding this important connection to the US. We continue to support the twin span and we urge the city of Buffalo to work co-operatively with the Peace Bridge Authority to ensure the situation is resolved as quickly as possible.

**Mr Maves:** We appreciate your continued support on the project. Ontarians expect the Minister of Transportation to work on our road structure so that we can continue to improve the economic growth of this province and the job creation therein. Can you tell the House, Minister, what the government has done to help ease traffic congestion in our area and what you plan to do in the future?

*Interjection.*

**Hon Mr Turnbull:** I hear chirps from across on the Liberal side. Your government did nothing.

*Interjections.*

**Hon Mr Turnbull:** The difference is, our government has been working at this. We've recently completed a major expansion of the QEW between Hamilton and St Catharines, some \$206.9 million invested.

**The Speaker:** Will the minister take his seat. I can't hear. It would be helpful if the comments were not inciteful to the other side as well, Minister.

**Hon Mr Turnbull:** I withdraw the word "chirping" and suggest the shouting across of the inaccurate information--

*Interjections.*

**Hon Mr Turnbull:** Yes, the member for Kingston and the Islands, which is not unusual for him.

Some two weeks ago I announced the Niagara needs assessment study. This will in fact study transportation needs for the entire Niagara Peninsula.

#### SCARBOROUGH FIRE

**Ms Marilyn Churley (Broadview-Greenwood):** Talk about inaccurate information. My question is for the Minister of the Environment.





Minister, yesterday in this House when you were asked about the public's need to know about how dangerous chemicals are used and stored in plants like U.S.E. Hickson, right beside residential communities, you said, and I quote from Hansard, "Any municipality has the ability to ask the government for that information."

Yes, but when my staff called the MOE yesterday, your ministry admitted that they never had a copy of this information until after the fire. So big deal; you can ask, but you can't get the information.

Minister, you led this Legislature to believe that your ministry has such information, when in fact it doesn't. Communities and firefighters need to have this information before a fire like this happens again. I'm going to ask you again today, will you bring in right-to-know legislation so that in case of another disaster like this, communities and firefighters know what's happening in their neighborhood?

**Hon Dan Newman (Minister of the Environment):** I refer that question to the Minister of Labour.

**Hon Chris Stockwell (Minister of Labour):** To the member opposite, I guess the problem is your staff phoned the wrong ministry. If they had phoned the Ministry of Labour they would have been informed that yes, all the chemicals are posted at work and provided to all the people who work in that facility.

All that information is on request by the local medical officer of health and, furthermore, the local fire departments are also in receipt of that upon request, and most, if not all, fire departments request that information as well. Further, any person who lives in the community simply can phone the medical officer of health and they will provide that person individually with all the ministry information that you need to know, all the chemicals that are stored on site.

So quite frankly I say to the member opposite, I understand that you didn't get the answer from the MOE, because you should have called the Ministry of Labour. All this information would have been provided to you without any problem, is properly provided every day. In fact, this law was passed back in 1988 under the previous--

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**The Speaker (Hon Gary Carr):** Order. I'm sorry, the minister's time is up. Supplementary.

**Ms Churley:** That's nice to know and it's nice for our communities to know that. It certainly didn't help the firefighters who got injured at the Plastimet fire in Hamilton, did it?

This is a serious issue here. The firefighters are calling once again for a public inquiry. The minister--I'm addressing this to the Minister of the Environment again--said yesterday in this House that changes were made to the fire code after the Plastimet fire. The fire marshal said that the changes to the fire code, which clearly does not go far enough, were all in motion before the Plastimet fire happened.

Minister, we asked for an independent inquiry after the Plastimet fire, as did the firefighters and the communities. Your Premier said no. Two major toxic fires have happened after that under your watch. People are worried about it happening again. There have been huge cuts to resources in your ministry.

Minister, I'm going to ask you again: After two new toxic fires, will you call an independent inquiry? We want to know whether it's worth the risk, for instance, to allow the storage and use of dangerous chemicals so close to a residential area; and if so, what kind of information needs to be out there in the communities? Minister, will you call that inquiry today?

**Hon Mr Stockwell:** You know, it's a slightly unfair question you ask. You did not have the proper information. I understand that. Certainly sometimes it can be complicated if you're trying to track down the proper ministry. This information is provided. The firefighters who were working this site and the fire chiefs who were on this site knew full well what chemicals they were dealing with. They knew so because of the good legislation in this province that provided this information. Anyone who lived in that community, if they so needed, could have accessed that information with a simple call to the medical officer of health.





The fact of the matter is that the legislation is clear. The information is provided to municipalities, it's provided to medical officers of health, it's provided to the firefighters. For you to stand up here and fearmonger that this stuff isn't out there just sets into the path the kind of unfair criticisms addressed to this government. The firefighters knew; the fire chief knew; the medical officer of health knew; the municipality knew. Clearly the only one--

**The Speaker:** Order. New question.

*Interjections.*

**The Speaker:** Government members come to order, please.

## AIR QUALITY

**Mr James J. Bradley (St Catharines):** I have a question for the Minister of the Environment, and I don't want him to pass this off to some other minister. In fact, this is a very easy question. You don't have to go into the new style that the whiz kids told you, of looking tough and giving a really strong answer. It's just a plain, easy question, and here it is: If you had the chance to prevent a 400% increase in air pollution and reduce premature deaths from respiratory complications by at least 50 people each year in the greater Toronto area, would you do so? Yes or no?

**Hon Dan Newman (Minister of the Environment):** In fact, this government has taken proactive steps on cleaning the environment and making the air better. We've led the charge on reducing greenhouse gas emissions in our own government operations. We set a target of 40%. We've hit 32% so far. That's far above what any other government in Canada has done.

**Mr Bradley:** I've got the solution for you. Minister, the Harris government can indeed prevent a 400% increase in air pollution and can indeed reduce the number of people in the greater Toronto area who could die prematurely from smog by at least 50 by following the advice of Mississauga Mayor Hazel McCallion, the chair of the city of Toronto's environmental task force and the chair of the Ontario Clean Air Alliance.

As Minister of the Environment, as the individual whose responsibility it is to protect the environment, will you give a firm commitment in the Legislature today that you will refuse to allow the sale of the Lakeview generating station, potentially the largest single source of air pollution in southern Ontario, to any buyer who will not convert this coal-fired plant to much cleaner natural gas? I ask you as Minister of the Environment, the defender of the environment, to answer that question.

**Hon Mr Newman:** That's under review and no decision has been made. But what I can tell the member opposite are some of the other initiatives of this government with respect to cleaning the environment. We've brought forward the Drive Clean program and that's working well. We have a pilot emissions reduction training program. We have Ontario's anti-smog action plan. I know that the member opposite would be in favour of that. We've brought in landfill management regulations and we've also brought proposed environmental regulations regarding the new competitive electricity market to Ontario.

## RURAL HEALTH SERVICES

**Mr Doug Galt (Northumberland):** My question is directed to the Minister of Health. As you know, the Task Force on Rural Economic Renewal has been consulting with the people across this province. As chair of this task force, I have listened to many differing views on a variety of topics. There has been considerable concern expressed about primary health care. In order to ensure a healthy working environment for rural Ontarians, including those in my riding, we must ensure that the primary health care needs of rural residents are being met.

Minister, can you provide us with assurance that your ministry understands today's primary health care needs in rural Ontario?



**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** As the member has indicated, we are certainly well aware of the fact that the issue of primary care is of significant importance to the rural community and to other communities in the province. As a result, as you know, we did pass legislation to introduce nurse practitioners. At the present time I'm pleased to say we've gone from supporting zero to 226 nurse practitioners in order that people throughout the province, particularly in the rural areas, have greater access to primary care. We've also had Dr McKendry's report, and that information has been given to the expert panel to ensure that we have the appropriate number and distribution of physicians. That's being headed up by Dr Peter George.

But in the interim I can tell you that Dr McKendry's report did lead to recommendations where we are now investing \$11 million to make sure that we take immediate steps to double the number of foreign graduate students and make them available for primary care across the province.

**Mr Galt:** Thank you very much, Minister, for that reassurance. I'm certainly very happy to see that our government can confirm its position on this issue and not flip-flop like the opposition does on the other side of the House.

However, in order to provide primary health care to rural Ontario, we need to ensure that a sufficient number of practitioners are located in rural areas to deliver this service. I want to see the day when there will be adequate numbers of health care practitioners in my jurisdiction. What is your ministry doing to ensure that not only my constituents but all residents of rural Ontario have access to health care practitioners?

**Hon Mrs Witmer:** I began to indicate that we were responding to Dr McKendry's report and that we have made available \$11 million. In doing so, we have doubled the number of foreign graduates.

I'm also pleased to say that beginning in July of this year we will be providing, as part of that \$11 million, \$800,000 to fund 15 additional post-graduate training positions in Ontario to recruit Canadian medical school graduates who are receiving their post-graduate training in the US. Also, as a result of the initiatives that presently are being undertaken by the expert panel under the leadership of Peter George, we are developing short-, medium- and long-term plans to ensure that we can have the appropriate distribution of physicians across the province as well as the appropriate supply. I am very confident that the work they're doing will, for the first time in the history of this province, give us the data that will allow us to plan for the future.

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## CONSTRUCTION INDUSTRY

**Mr Jean-Marc Lalonde (Glengarry-Prescott-Russell):** My question is to the Minister of Labour. On November 12 of last year, at a press conference in Ottawa, you announced that you had concluded an agreement on construction labour mobility with your Quebec counterpart, Minister Diane Lemieux. According to your statement, Bill 17, An Act respecting Labour Mobility in the Construction Industry, would be shelved and Ontarians would have better access to Ouatouais-area construction sites as long as they continued paying registration fees. In return, Quebec workers and contractors would have full access anywhere in Ontario without paying any registration.

Construction work is being done on the Champlain Bridge in Ottawa. The work started on the Ontario side over three months ago with workers from Quebec and Ontario. The project has now reached the middle pillar of the bridge. Since the pillar is on the Quebec side, five Ontario crane operators were let go, even though they all had their licences.

My question to you is, have you had any discussions with your Quebec counterpart to ensure that we respect the signature of the agreement and that Ontario construction workers can work in Quebec without harassment?

**Hon Chris Stockwell (Minister of Labour):** That's a good question. That's accurate too. The situation, as I understand it, is exactly as you described it. The situation was brought to my attention last week.





also by yourself. It was referred to the committee to deal with quickly. I asked them to get a response back to me this week. They will, in my opinion, respond this week. As I said to you last week--I gave you my undertaking--as soon as I hear from them, I will fully brief you and ensure that the situation resolves itself. It's not an acceptable situation. We on this side do not accept it. We gave that message directly to the Quebec government.

**Mr Lalonde:** Since your government did not enforce section 24 of the bill, which gave you the power to fine workers and contractors anywhere from \$2,000 to \$25,000 a day for having worked in Ontario without having registered with the Ontario job protection office, and you also said the Quebec government would cancel all fines received by Ontario contractors and workers for having worked in Quebec without proper licences, Minister, when can we get confirmation that the fines issued to the Ontario workers and contractors have been cancelled?

**Hon Mr Stockwell:** We will confirm it as soon as I confirm it with the Quebec government. I gave you that undertaking, and I will live by it. We said that we would go about and ensure that the situation was resolved. In fact, we will do that.

We have taken a very hard line with Quebec; there's no doubt about it. We've taken a very hard line with respect to these negotiations. We've demanded access. They signed an agreement that gives us access, thanks greatly in part to the members represented from that area in this caucus, because we as a caucus took a very hard position.

Let me tell you something. We don't plan on backing up. The bill is in abeyance. If they don't live up to the letter of the law, we're going to put that bill back in place. We've told them that flat out.

One other thing. It took the kind of leadership, the kind of hard work that this government provided, to get us this far. In 25 years, there weren't any Ontarians working in Quebec. There were many administrations and there were many deals signed. I may hear from the member for the NDP. You signed the deal. Nothing was resolved. Thanks to the members in this caucus who stood strong--

*Interjections.*

**The Speaker (Hon Gary Carr):** Order. The minister's time is up.

#### SALE OF ILLEGAL DRUGS

**Mrs Brenda Elliott (Guelph-Wellington):** My question today is for the Minister of Consumer and Commercial Relations. The parents in my riding who have read frightening newspaper reports of violent situations and dangerous drug use in nightclubs and in after-hours clinics and in raves are concerned about the safety of their teenagers and their youth. They are worried that their kids are going to get mixed up in some of these places and be seriously at risk or hurt.

During the recent provincial election, our government made a commitment in the Blueprint to crack down on illegal drugs by going after places where drug dealing occurs. Minister, could you tell the members of this House what action you're taking to live up to this commitment to the people of Ontario?

*Interjections.*

**Hon Robert W. Runciman (Minister of Consumer and Commercial Relations):** Again we heard comments from across the floor, and I can assure the members of this House that we will take significant action, unlike former governments.

We made a commitment in the Blueprint document to crack down on the sale of illicit drugs in licensed establishments. The Harris government has a record of keeping its promises and this is one additional promise that we are going to fulfill.

In March of this year the Solicitor General and I co-sponsored a summit which brought together officials from the federal government, the municipal governments, provincial policing authorities and municipal





policing authorities to discuss inter-jurisdictional methods--including, I may say, the deputy leader of the Liberal Party, who attended as well--to try to find solutions to deal with this very significant concern of many people across this province. We have pulled together a draft report.

**Mrs Elliott:** Thank you, Minister. I know my constituents are going to be pleased that our government is taking leadership in looking at this very serious issue. But, with respect, we all go to a lot of meetings and we all go to a lot of conferences. What my constituents want to know is what concrete actions you anticipate are actually going to come out of this so that when their kids go out in the evening they have some reassurance that the places they'll be visiting are indeed safe and that they will come home to their families safe.

**Hon Mr Runciman:** We're certainly concerned about the safety of all Ontarians, but I think especially young people with respect to after-hours clubs, rave parties and licensed establishments in this province. When we initially designed the concept of a summit, I was approached by Superintendent Ron Taverner of the Toronto police who expressed his police service's concerns about rave parties and the proliferation of so-called designer drugs at many rave parties across the province.

This was certainly an important ingredient of the summit. We talked about ways we can attack that particular problem, but also looking at after-hours clubs, licensed establishments where illicit drugs are proliferating and an interdisciplinary way that we can attack these problems working together at the federal, provincial and municipal levels. We have prepared a draft report summarizing the recommendations, and that report will be finalized and made public sometime in June.

#### HOSPITAL FUNDING

**Mr David Christopherson (Hamilton West):** My question is for the Minister of Health. Minister, you will know by now that the chair of the Hamilton Health Sciences Corp has stated at a news conference earlier this morning that your actions, as far as they are concerned, amount to duplicity and, further, that your actions point to the fact, "We have been betrayed as a board and a community."

The reason they feel this way, of course, is because your senior ministry staff have been a part of not just the operational review but also a part of the recovery plan, the very plan that you refused to table and comment on as to whether or not you support those recommendations that include shutting down the emergency ward at Henderson.

The board is on the brink of resigning in disgust over the way that you're trying to backpedal and put distance between you and these reports, and at the very least, you owe them an immediate meeting--which they have probably forwarded to your office by now. Will you agree to meet with the board as soon as possible, and by that I mean within the next couple of days, to deal with your allegations as well as theirs?

**Hon Elizabeth Witmer (Minister of Health and Long-Term Care):** The member may or may not know that I have already personally talked to the chair of the board. I have indicated that the chair and the board have an opportunity to present information to me. That's why I gave--

**Mr Christopherson:** They want to meet with you immediately.

**Hon Mrs Witmer:** Yes, and they will be. They already know that that's happening. We've already had the conversation.

Again, I would assure you that what we're dealing with is a third party, independent report that has indicated that there are some very serious issues at the corporation that need to be dealt with and some very serious questions regarding public confidence in the hospital and the lack of ability to recruit and retain physicians. Obviously we are responding today and yesterday to the third party report that indicates that there is a need for action, and we are moving forward to take that action. We're supported by the nurses at the hospital who have agreed that the situation described in the report--

**The Speaker (Hon Gary Carr):** I'm afraid the minister's time is up.



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**PETITIONS****DOCTOR SHORTAGE**

**Mr James J. Bradley (St Catharines):** I have a petition to the Legislative Assembly of Ontario:

"Whereas patients requiring eye care in Niagara are faced with a shortage of ophthalmologists and as a result, are compelled to wait several weeks to secure an appointment with an ophthalmologist;

"Whereas, while the shortage of ophthalmologists is in existence, the removal of the billing cap on these medical specialists provides a temporary but essential easing of the health care crisis;

"Whereas the solution of the Ontario Ministry of Health removing the exemptions of the billing cap and forcing patients from Niagara to travel along the very busy Queen Elizabeth Highway to receive treatment in Hamilton is unacceptable;

"Be it resolved that the Ontario Ministry of Health remove the cap on billing for ophthalmologists in Niagara until such time as Niagara is no longer an underserved area."

I affix my signature as I am in complete agreement with the sentiments expressed in this petition.

**PROTECTION OF MINORS**

**Mr Doug Galt (Northumberland):** I have a very thick petition here from the Catholic Women's League of Canada. It's from a person in Woodstock and it is addressed to the Legislative Assembly of Ontario.

"Whereas children are exposed to pornography in variety stores and video rental outlets; and

"Whereas bylaws vary from city to city and have failed to protect minors from unwanted exposures to pornography;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"To enact legislation which will (1) create uniform standards in Ontario to prevent minors from being exposed to pornography in retail establishments, (2) prevent minors from entering establishments which rent or sell pornography, and (3) restrict the location of such establishments to non-residential areas."

I submit this on behalf of the many signatures here and the Honourable Ernie Hardeman.

**HIGHWAY SAFETY**

**Mr John Gerretsen (Kingston and the Islands):** I have a petition here which is addressed to the Legislative Assembly of Ontario and it states:

"Whereas 13 people died during the first seven months of 1999 on Highway 401 between London and Windsor; and

"Whereas traffic levels on all sections of Highway 401 continue to increase; and

"Whereas Canada's number one trade and travel route was designed in the 1950s for fewer vehicles and lighter trucks; and

"Whereas road funding is almost completely paid for through vehicle permit and driving licence fees; and





"Whereas Ontario road users pay 28 cents per litre of tax on gasoline, adding up to over \$2.7 billion in provincial gas taxes and over \$2.3 billion in federal gas taxes;

"We, the undersigned members of the Canadian Automobile Association and other residents of Ontario, respectfully request the Legislative Assembly of Ontario to immediately upgrade Highway 401 to at least a six-lane highway with paved shoulders and rumble strips; and

"We respectfully request that the Legislative Assembly of Ontario place firm pressure on the federal government to invest its gasoline tax revenue in road safety improvements in Ontario."

I agree with the petition. I've signed it. I'm handing it to Andrew Walker, who is one of our pages from Glenburnie, Kingston.

#### **LORD'S PRAYER**

**Mr Garfield Dunlop (Simcoe North):** "Whereas the prayer, Our Father, also called the Lord's Prayer, has always been used to open the proceedings of municipal chambers and the Ontario Legislative Assembly since the beginning of Upper Canada under Lieutenant Governor John Graves Simcoe in the 18th century; and

"Whereas such use of the Lord's Prayer is part of Ontario's long-standing heritage and a tradition that continues to play a significant role in contemporary Ontario life;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"That the Parliament of Ontario maintain the use of the Lord's Prayer in its proceedings, in accordance with its long-standing established custom."

I'll affix my name to that.

#### **INTERNATIONAL ADOPTIONS**

**Mr Joseph Cordiano (York South-Weston):** To the Legislative Assembly of Ontario:

"Whereas the Conservative government has arbitrarily imposed a \$925 head tax on international adoptions; and

"Whereas the cost to the government for processing international adoptions is no greater than that for domestic adoptions, which are not subject to the head tax; and

"Whereas in the United States parents are offered a tax credit of \$5,000 to offset the enormous costs of international adoption; and

"Whereas the cost for an international adoption can range from \$20,000 to \$30,000,

"We, the undersigned, petition the Legislative Assembly of Ontario as follows and demand that this head tax be immediately revoked."

There are 177 signatures attached to this petition and I also affix my signature to this petition.

#### **PROTECTION OF MINORS**

**Mr John O'Toole (Durham):** I'm pleased to present a petition on behalf of my constituents in the riding of Durham, specifically Maria Speziale, Denis Radcliffe, Randy Foster and a number of other constituents:

"Whereas children are exposed to sexually explicit material in variety stores and video rental outlets;





"Whereas bylaws vary from city to city and have failed to protect minors from unwanted exposure to sexually explicit materials;

"We, the undersigned, petition the Legislative Assembly of Ontario as follows:

"First, to enact the following legislation:

"To create uniform standards in Ontario to prevent minors from being exposed to sexually explicit material in retail establishments; and

"Second, make it illegal to sell, rent, or loan sexually explicit materials to minors."

I am pleased to support and sign this petition on behalf of my constituents of Durham.

#### **NORTHERN HEALTH TRAVEL GRANT**

**Mrs Lyn McLeod (Thunder Bay-Atikokan):** "To the Legislative Assembly of Ontario:

"Whereas the northern health travel grant was introduced in 1987 in recognition of the fact that northern Ontario residents are often forced to receive treatment outside their own communities because of the lack of available services; and

"Whereas the Ontario government acknowledged that the costs associated with that travel should not be fully borne by those residents and therefore that financial support should be provided by the Ontario government through the travel grant program; and

"Whereas travel, accommodation and other costs have escalated sharply since the program was first put in place, particularly in the area of air travel; and

"Whereas the Ontario government has provided funds so that southern Ontario patients needing care at the Northwestern Ontario Cancer Centre have all their expenses paid while receiving treatment in the north which creates a double standard for health care delivery in the province; and

"Whereas northern Ontario residents should not receive a different level of health care nor be discriminated against because of their geographical locations;

"Therefore, we, the undersigned citizens of Ontario, petition the Ontario Legislature to acknowledge the unfairness and inadequacy of the northern health travel grant program and commit to a review of the program with a goal of providing 100% funding of the travel costs for residents needing care outside their communities until such time as that care is available in our communities."

It's signed by a number of additional constituents, and I affix my signature in agreement with their concern.

#### **KARLA HOMOLKA**

**Mr John O'Toole (Durham):** I rise to present a petition to the Legislative Assembly of Ontario. Really, if I may make a remark, the member for Scarborough Centre has gone to great lengths to connect this petition.

"To the Legislative Assembly of Ontario:

"Whereas Karla Homolka and Paul Bernardo were responsible for terrorizing entire communities in southern Ontario; and

"Whereas the Ontario government of the day made a deal with the devil with Karla Homolka resulting in a sentence that does not truly make her pay for her crimes; and



"Whereas our communities have not yet fully recovered from the trauma and sadness caused by Karla Homolka; and

"Whereas Karla Homolka believes that she should be entitled to passes to leave prison with an escort;"--if you can imagine it--"and

"Whereas the people of Ontario believe that criminals should be forced to serve sentences that reflect the seriousness of their crimes;

"Therefore we, the undersigned, respectfully petition the Legislative Assembly of Ontario as follows:

"That the government of Ontario will:

"Do everything within its power to ensure that Karla Homolka serves her full sentence;

"Continue to reform parole and make it more difficult for serious offenders to return to our streets;

"Fight the federal government's plan to release up to 1,600 more convicted criminals on to Ontario streets; and

"Ensure that the Ontario government's sex offender registry is functioning as quickly as possible."

I'm pleased to report that the sex offender registry is in process, and I will sign and support this petition.

#### EDUCATION FUNDING

**Mr Michael A. Brown (Algoma-Manitoulin):** I have a petition against the education funding formula as applied to the Algoma District School Board.

"To the Legislative Assembly of Ontario:

"Whereas the current education funding formula stipulates that should the student population of a given district divided by the district's area equal less than 1.0, the district is to be funded as a low-density area; and

"Whereas Algoma District School Board has approximately 15,000 students and covers an area of 70,534 square kilometres and as such has a quotient of 0.21;

"We, the undersigned taxpayers, supporters and district school council members of the Algoma District School Board petition the Legislative Assembly of Ontario to instruct the Minister of Education to review the current education funding formula as it applies to the Algoma District School Board of northern Ontario and rightfully designate it as low-density."

I have literally thousands of these petitions and I am in full agreement and have signed it.

1500

#### ABORTION

**Mr John O'Toole (Durham):** It is seldom that I get up to speak, but with your permission and indulgence, Mr Speaker, I have another petition. It's surprising how accessible I am to the people of Ontario. This is clearly demonstrating that.

"To the Parliament of Ontario:

"Whereas we have recently learned that our tax money is being used to pay the rent on the Morgentaler abortuary; and





"Whereas by the end of his lease this amount will be \$5 million annually;

"Whereas we strongly object to this use of our tax dollars;

"We, the undersigned, petition the Parliament of Ontario to immediately cease these payments."

I'm pleased to sign my name to this petition.

#### NORTHERN HEALTH TRAVEL GRANT

**Mr Michael Gravelle (Thunder Bay-Superior North):** Like all my northern colleagues, we have thousands of names on petitions related to the inadequacy of the northern health travel grant. I will read it.

"To the Legislative Assembly of Ontario:

"Whereas the northern health travel grant was introduced in 1987 in recognition of the fact that northern Ontario residents are often forced to receive treatment outside their own communities because of the lack of available services; and

"Whereas the Ontario government acknowledged that the costs associated with that travel should not be fully borne by those residents and therefore that financial support should be provided by the Ontario government through the travel grant program; and

"Whereas travel, accommodation and other costs have escalated sharply since the program was first put in place, particularly in the area of air travel; and

"Whereas the Ontario government has provided funds so that southern Ontario patients needing care at the Northwestern Ontario Cancer Centre have all their expenses paid while receiving treatment in the north which creates a double standard for health care delivery in the province; and

"Whereas northern Ontario residents should not receive a different level of health care nor be discriminated against because of their geographical locations;

"Therefore, we, the undersigned citizens of Ontario, petition the Ontario Legislature to acknowledge the unfairness and inadequacy of the northern health travel grant program and commit to a review of the program with a goal of providing 100% funding of the travel costs for residents needing care outside their communities until such time as that care is available in our communities."

I have thousands of names here on petitions and I'm very pleased to add my name to this petition.

#### ABORTION

**Mr Joseph Spina (Brampton Centre):** My petition is to the Parliament of Ontario from a number of constituents.

"Whereas we have recently learned that our tax money is being used to pay the rent on the Morgentaler abortuary; and

"Whereas by the end of his lease this amount will be \$5 million;

"Whereas we strongly object to this use of our tax dollars;

"We, the undersigned, petition the Parliament of Ontario to immediately cease these payments."

I'll affix my signature to this.

#### TIMBER CUTTING





**Mr Alvin Curling (Scarborough-Rouge River):** I have a petition in support of my colleagues Michael Gravelle and Lyn McLeod, who have received these petitions.

"Whereas timber cutters are trespassing on private and crown land, cutting, removing and selling trees, leaving a financial, environmental, aesthetic and emotional devastation in their wake; and

"Whereas the OPP have no authority to stop a cutter from cutting in the event of a boundary dispute, but may only inform the cutter that a complaint has been lodged; and

"Whereas the mills accept all timber from their contractors whether it is stolen or not; and

"Whereas the practice of the crown attorney's office to delegate these obvious theft issues to civil court places an unreasonable and prohibitive financial burden on the landowner-victim; and

"Whereas the offending cutters are protected by their numbered companies, lease their equipment and declare bankruptcy rather than pay fines and restitution, and immediately register a new numbered company, the landowner-victim must then pay:

"(1) All court costs and legal fees incurred by the offender as well as their own legal fees;

"(2) The cost of the survey;

"(3) The cost of hiring and posting bond for a bailiff, an appraiser, a salesman and bond for each piece of property and for equipment seized from the convicted cutter at the rate of at least \$2,000 for each of the above-listed;

"(4) The cost of cleanup and reforestation; and

"Whereas traditionally settlements to landowners-victims have amounted to the price of stumpage fees for the stripped area, while the cutter profits from the full price of the timber from the mill; and

"Whereas, because the offending cutter must work quickly to avoid detection, he/she leaves the land devastated, with little or no thought to environmental areas of concern, eg, wetlands, reforestation;

"Therefore we, the undersigned citizens of Ontario, petition the Ontario Legislature to acknowledge the unfairness to landowners-victims in the overwhelming support of illegal cutting of private and crown lands.

"We advocate:

"(1) That the cases be tried as grand theft in a criminal court;

"(2) That in the event of a boundary dispute the party who is to benefit financially (ie, the cutter) be responsible for the cost of a survey by a registered surveyor and not a forester;

"(3) Final judgments should not only include fines, all costs incurred for pursuit of justice and stumpage fees, but the full price of the timber, the cost of cleaning up the clear-cut area and the cost of reforestation and maintenance of the cut area, thus making theft of timber from private and crown lands potentially non-profitable;

"(4) Contracts of convicted cutters should be subject to suspension or termination, just as drunk drivers lose licences."

I'll sign this in support of this petition.





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# Ontario Hansard

NO. 40 [A]

1st session, 37th Parliament | 1<sup>re</sup> session, 37<sup>e</sup> législature

Tue 11 Apr 2000 / Mar 11 avr 2000

## ORDERS OF THE DAY

### HEALTH CARE FUNDING

Resuming the debate adjourned on April 10, 2000, on the amendment to the amendment to the motion by Mr Harris relating to health care funding.

**Mr Michael Gravelle (Thunder Bay-Superior North):** I'm pleased to have the opportunity of completing my remarks from last night relating to the Premier's resolution on health care funding and the amendments to that resolution that have been put forward by both the Liberal and the NDP caucuses.

What strikes me most clearly about this debate is that the Premier and this government seem more concerned with attaching political blame related to our health care crisis than they do to working towards a real solution. Both the provincial and the federal governments' decision to spend millions of dollars of taxpayers' money on nasty advertising campaigns, blaming each other for the declining standards of our health care system, deserves, I believe, our condemnation. Surely those millions could be better spent on opening hospital beds, providing speedier access to an MRI or hiring some much-needed nurses.

I believe I speak for the constituents of my Thunder Bay-Superior North riding when I say that the people of this province expect their senior levels of government to work together to repair our seriously damaged health care system, and not to frustrate all of us by playing this mindless and counterproductive blame game.

Having said that, I believe, as do my colleagues on this side of the House, that the government of Canada should immediately restore on a permanent basis the health funding it has cut in the past, and indeed must assume its fair share of increased ongoing funding to meet the health care needs of our country's aging and growing population.

But it must also be said that while the federal government must be a fair partner in this process, there is much about Mr Harris's resolution that smacks of nothing more than politics at its worst, and that is not what is needed now. After all, it has clearly been decisions made by the Mike Harris government, decisions they have even acknowledged to be wrong, that have left us in the mess we are in today. And let's not forget that these decisions were made to finance a tax cut rather than to deal with a shortage of transfer payments from the federal government.

As you know, Mr Speaker, one of the first decisions made by the Mike Harris government was to cut hospital funding by some \$800 million. I'm glad to see agreement on the other side of the House. This withdrawal of financial support was the key to all that followed: massive cutbacks in hospital beds, the layoff of 10,000 nurses, backed-up emergency rooms and people being removed from hospitals sicker and quicker. Remember, this is also the government that forcibly closed hospitals all across the province, this done by a Premier who said during the 1995 election campaign, "It is not my plan to close hospitals."





All this moved towards something I think we all are very concerned about: a frightening move towards two-tier health care as this system became increasingly privatized and we lurched towards American-style health care.

But what's important to say here is that this was not an accident. It was all part of a deliberate decision by the Mike Harris government to change the way we delivered health care. So when we all hear the Premier telling the federal government or telling anyone that they may be forced to privatize more of our health care system unless more funds are transferred from the federal government, I almost choke on the absurdity of that statement. After all, this is a government whose ideology is grounded on the belief that privatization is the answer to all our problems. Whether it's toll roads or the maintenance of those roads or our jail system or our health care system, they believe privatization is the way to go, even when the evidence is overwhelmingly out there that privatization is certainly going to cost more and is not providing the service to the people that they expect and deserve from their government.

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Let's also not forget that this is a government that did not even spend all the health care funds that the federal government sent them last year. Instead, they played a shell game with our health care dollars while people could not get a hospital bed, and vital programs such as the eating disorders program at St Joseph's Care Group in Thunder Bay remained unfunded and unsupported by the province.

If I may speak, in the few remaining moments of time that I have, as a northerner, as a representative of Thunder Bay-Superior North, a vast riding where health care is clearly the number one issue, every day, like all my colleagues, I hear many horror stories of a health care system that's gone amok. There are so many areas I would like to discuss, but I won't have time. But I think it's important for me to say that there is perhaps no issue which upsets my constituents more than the fact that the northern health travel grant, put in place by a Liberal government in 1987, no longer remotely meets the needs of the people who must travel outside their communities for specialized medical care. While this government refuses to review the adequacy of the travel grant program and in fact is spending \$6 million a year less than they did five years ago on this program--

**Mr Alvin Curling (Scarborough-Rouge River):** Shame.

**Mr Gravelle:** It is a shame. People are spending thousands of dollars of their own hard-earned money to seek medical care elsewhere. In the meantime, this government has made a decision to pay the full cost of cancer patients who reside in southern Ontario, because of the mess they made of that system, to receive treatment in northwestern Ontario, at the cancer centre in Thunder Bay. While we feel for these people very strongly, the government is truly being unfair. While northerners are being treated as second-class citizens by the province, people from other parts of the province are having their travel, accommodation and meal costs looked after by the government. This is nothing more than discrimination. It's an issue that all of us in the north find unacceptable and will continue to fight.

I cannot tell you the number of people I've spoken to whose lives have been altered in such a dramatic fashion as a result of the fact that they must seek medical help elsewhere. If the government will acknowledge that indeed there is help that is required, they have to acknowledge that this program no longer meets those needs. It is something we want to continue to fight for.

If I may, in my last moments as well, I'd like to make reference to the eating disorders program at St Joseph's Care Group, an extraordinarily important program funded out of the operating funds of the hospital. They fund eating disorder programs in other parts of the province but will not do it in Thunder Bay, in northwestern Ontario. We think that is just dreadful as well and we will continue to fight to get them to understand that that is needed.

**The Speaker (Hon Gary Carr):** Further debate?

**Mr Ted Chudleigh (Halton):** Let me just say how disappointed Ontarians are that the Prime Minister just recently has refused to meet with the premiers of the provinces to discuss what is perhaps the most difficult and impending problem that Canadians face across this entire country--not just in this province



but across the entire country. The Prime Minister of this country, the leader of this country, has refused to meet with the premiers to discuss this in very real terms.

**Mr Marcel Beaubien (Lambton-Kent-Middlesex):** Why is that?

**Mr Chudleigh:** "Why is that?" asks my friend from Petrolia. He comes from a riding which surrounds Petrolia--it's basically Petrolia, isn't it?

**Mr Beaubien:** Well, Lambton-Kent-Middlesex.

**Mr Chudleigh:** He asks, "Why is that?" I suspect it's because they have nothing to bring to the table. They have no ideas. They are devoid of ideas. They have nothing to bring to the table and they are afraid of coming to the table to be embarrassed, so they have refused this meeting.

Ontario, on the other hand, has had a great deal of leadership in the health care area across Canada. In 1995, when we were elected, our health budget, as the opposition has heard, was approximately \$17.4 billion. In the intervening five years or so, that budget has increased to \$20.8 billion, while at the same time Ottawa has withdrawn \$1.7 billion of their share of that funding. So not only did we have to increase the budget to \$20.8 billion, but we had to make up that \$1.7 billion that Ottawa refused to contribute to Ontario's health care system. So, yes, we are looking for help from Ottawa, for their fair share.

Where at one time they funded practically 50% of the health care system in Ontario, today that ratio has dropped to 11%. Out of every dollar that goes into health care in Ontario, rather than Ottawa spending their fair share of 50%, they are instead spending 11 cents, while Ontario is contributing 89 cents of every dollar going into health care, certainly a far cry from what the Canada Health Act envisioned as a sharing of the health care dollars between Ontario and Ottawa. The federal Liberals have clawed back much of that money out of the Canada health and social transfer programs, leaving Ontario in a deficit position as far as that health care budget is concerned.

The Ontario government has been working hard over the past five years on reforms and innovations to the health care system as we implement our vision for health care. We have a health care action plan to allow us to accomplish this. Now the feds are just trying to join the race and they're running hard in order to get to the start of the parade, a parade that already started without them.

Primary care reform is not new to Ontario, and it is important to emphasize this fact in the Legislature today. Ontario is a leader in primary care reform, and we have been working since 1995 in partnership with the Ontario Medical Association on primary care initiatives. The government of Ontario has consistently stated that it is committed to the idea of primary care and will continue to move ahead with its implementation. However, unlike Dalton McGuinty's Liberals over there, we are doing it in partnership with doctors, not at odds with doctors.

**Mr Beaubien:** We believe in co-operation.

**Mr Chudleigh:** We believe in co-operation. Absolutely.

The federal government has talked about pharmacare programs and drug programs. They have talked about it; Ontario has done something about it.

The federal Liberal government has often spoken about the need to establish a national pharmacare program; indeed, it was an election commitment by the federal government. Unfortunately, since the election we haven't heard another word about it. In its five years of governance, this government--I can remember many times in this House thinking, as the minister made an announcement during routine proceedings, "There is another promise that we made during the election, another promise kept." Unfortunately, that doesn't happen when you get just a short distance away from here to Ottawa. There the reverse is true: Election promises are seldom kept.

However, we have not waited for the federal leadership to act. The government of Ontario has been





working for a number of years reforming and enhancing Ontario's drug programs. It is important to provide information on the work done on this program to remind both the House and the federal government that this government has an action plan for health care and for implementing this plan today. Costs in this area are rising fast, and with the growing and aging population, this growth and expense will only increase. It is time for the federal government to assume their fair share of these costs.

In Ontario we have three stages of drug programs. Ontario's drug programs include the Ontario drug benefit program, the Trillium drug plan and the special drugs program. The Ontario drug benefit program is the largest plan, and it covers over 3,100 prescription drugs. Since our government took office in 1995, 1,018 products have been added to the ODB, providing new and innovative drugs that will help people live with their diseases or recover from them. The \$1.6-billion program covers about 2.2 million seniors and social assistance recipients in Ontario. There were 44 million prescriptions written under this program in 1998-99.

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The Trillium drug program is a very unique program. The Trillium drug program is for those who are not otherwise eligible for the Ontario drug benefit program but who may have very high drug costs. Approximately 100,000 Ontarians who need expensive drugs to treat serious illnesses like cancer, HIV and cystic fibrosis have their drugs paid for through this program. Expenditures for the Trillium drug program for 1998-99 totalled \$45.5 million, up from \$35 million the year before.

The special drugs program covers the full cost of certain expensive outpatient drugs such as special drugs for AIDS, organ transplants, cystic fibrosis, schizophrenia and thalassemia. The program provides funding for over 12,000 beneficiaries, at a cost of approximately \$92 million annually.

Extensive reform and innovation is being demonstrated by the government of Ontario in the area of drug programs. If the federal government has any ideas about health care reform, we look forward with anticipation to hearing about those reforms, but we have heard nothing new to date from the federal Liberal government. The federal Liberal government must immediately restore the \$4.2 billion in the Canada health and social transfer funding for health care that it slashed so that we can use that funding to support our important health care innovations.

The government of Ontario recognized upon taking office in 1995 that we have a rapidly aging population and that it was important to plan now for that future. If anyone had the opportunity to read the book *Boom, Bust and Echo* by David Foot, it points out very clearly what is going to happen to the Canadian health program if you don't take major steps today to put that program, that whole health care system, into a mode that will support huge numbers of people as that boom, bust and echo begins to happen in Ontario.

The Minister of Health, on behalf of the government of Ontario, provided Allan Rock, the federal Minister of Health, with information last week on what we are doing in the areas of home care and long-term-care needs and asked him for any comments and suggestions about our programs. Again, I'm afraid I have to report that at this point in time we have heard nothing, not one word, from Minister Rock. If the federal government supports home care and long-term care for some of our most vulnerable citizens, it should restore the \$4.2 billion in CHST health funding it cut from the provinces that could be used to support important programs such as these.

**Home care:** Ontario has one of the most generous home care programs in Canada. The Ministry of Health currently spends about \$1.5 billion annually on home care and community care services. From 1994-95 to 1999-2000, funding for community services increased by 49% and in-home services funding increased by 56%. Ontario provides the most generous levels of home care services in Canada--\$115 per capita. The next closest is Manitoba at \$97 per capita.

**Community care access centres:** In 1996, this government established 43 community care access centres across the province, offering support to Ontario residents who seek community based long-term health care. This allows services to be delivered closer to home for Ontario citizens. CCACs coordinate access to homemaking, nursing, therapy and other services to people at home, as well as providing





long-term-care facility placements and vital information to caregivers about the services and support available to their family and friends.

In April 1998, this government announced the largest-ever expansion in health care services to Ontario. The government will be investing \$1.2 billion to improve long-term-care facilities and community programs. No new long-term-care beds had been built in this province for over a decade, while the senior population had been growing. By adding these new beds, our government will ensure that necessary long-term-care facilities and services will be in place to meet the demands that the future will place on us. This program will create more than 20,000 new long-term-care beds in the province and will add to that number the renovation of a further 13,000 beds.

In the area of mental health, our extensive mental health reforms include leading a consultative review on mental health reform in Ontario, which was led by Dan Newman, the new Minister of the Environment. He began a mental health law education project to inform Ontarians, especially professionals, about their rights and responsibilities under existing mental health legislation. We developed a provincial forensic policy and opened 446 new forensic beds across the province. We initiated a review of the Mental Health Act and related legislation to ensure that the mental health service delivery system is accessible, accountable, cost-efficient and promotes public safety.

It's a pleasure to stand here and talk about the accomplishments that we have made here in Ontario and how much greater those accomplishments could be if the federal government would re-establish the \$4.2 billion they took out of Ontarians' pockets with their cuts to health care. Perhaps one of the most telling comments that I see in these notes is a quote from Allan Rock in a speech that he made on August 20, 1997:

"I will not stand here and tell you that the cuts in transfer payments we made were insignificant. They were not. And I won't tell you that they have not had an impact. They have."

Mr Rock fixed the problem.

**Mr Garfield Dunlop (Simcoe North):** It's a pleasure today to speak on the Premier's resolution that "Condemns the government of Canada for cutting, by \$4.2 billion annually, base payments under the federal program that supports health care"--the Canada health and social transfer--"while provincial governments have increased health spending."

Since 1994-95, the federal government has cut \$4.2 billion from health care transfer payments to the provinces, and over the same period Ontario has increased health care spending by over \$3 billion here in Ontario. It is clear that the federal Liberals are responsible for the largest health funding cut in Canadian history. In the last budget, the federal Liberals had a chance to rectify their problems by restoring the funding. They had a surplus, but failed to inject more money into our health care system. In short, the federal government has failed to live up to its commitments to the people of Ontario. Once again, the federal government has failed to recognize the needs of the growing and aging population in Ontario. The \$2.5 billion in one-time funding in the last budget is clearly not enough.

I'd like to take a bit of time from this debate to boast a little bit about the hospitals and the health care services that we have in my riding of Simcoe North. They rank as some of the best in our province.

Yearly, hospitals around the province are evaluated in four general areas, and Soldiers' Memorial Hospital in Orillia is the only hospital in Ontario rated above average two years in a row for the amount of staff time devoted to patients. As well, the hospital is a recipient of the National Quality Institute's Canada Award for Excellence: Quality--Health Care, "for a strong and ongoing commitment to continuously improving the patient experience and responding to the changing needs of the community." As well, I should point out that currently in our hospital, at the Orillia Soldiers, we're trying to put our final plans together to get approval for a major redevelopment project.

In the western part of my riding, the Penetanguishene General Hospital and the Huronia District Hospital saw the inefficiencies in their two hospitals long before the restructuring commission and decided to form an alliance to eliminate those inefficiencies and reinvest those dollars back into the health care



system of the area. This is one of the most important elements of health care system reform, health care providers working together to improve a system. That is what these two hospitals have done in Midland and Penetang, and I commend them and their staff for those efforts.

In February, I had the honour of taking part in the opening of a new kidney dialysis unit at the Penetanguishene General Hospital. This temporary service will give local dialysis patients in the western part of the riding three-times-a-week access to local treatment. These services will ensure that some of north Simcoe's patients do not have to drive to Orillia, which will relieve pressure on the Orillia Regional Dialysis Centre at Soldiers' Memorial Hospital. I'm proud to represent this hard-working, determined team of health care professionals.

According to the Health Services Restructuring Commission, which was created by this government to look at ways of reforming our health care system, a plan was created for the hospitals in our province to become more efficient and more effective. The HSRC also urged the government to approve more long-term-care beds for our seniors.

I'd like to inform this House that construction is taking place in both Orillia and Midland for the creation of more long-term-care beds, as outlined in our government's health action plan. At the new Village of Leacock Point Health Care Centre in Orillia, we are building 68 new long-term-care beds and that construction is just beginning now. At St Andrew's Centennial Manor in Midland, about 100 long-term-care beds are being created for the fine people of Simcoe North. This is a redevelopment project.

1530

Since the Harris government was elected, 533 new long-term-care beds have been allocated to Simcoe county. This fits in quite nicely with the two manors, the Georgian Manor and the Trillium Manor in my riding that are operated by the county of Simcoe.

The provincial government has also committed to update 303 long-term-care beds in Simcoe county alone. Provincially, this government has committed to creating over 20,000 new long-term-care beds, which will improve access to community based services for an additional 100,000 Ontarians. I am proud to be part of a government that understands the long-term-care needs not only of my riding, but of my county and my province.

While hospital reforms creating new long-term-care beds are important, giving Ontarians access to a doctor is one of the foundations of our health care system. That is why our government introduced primary care networks in 1998. Primary care networks are made up of family doctors joining together in their communities to provide easier access to health services and better coordination of health information through computers. The networks will help reduce waste and duplication in the health care system.

Health service is of higher quality because there is better communication about the patient's health. The family doctor, nurse or health care professional that the patient deals with will keep his family doctor informed about his or her own health care problem.

I would like to encourage the federal government to take a look at how we are providing ambulance services in Simcoe county based on a 50-50 agreement between the province and the county. I guess I should explain, for the benefit of the federal government, the province agrees to pay half of the cost of ambulance services while the county agrees to pay the other half. Wouldn't it be nice if the federal government paid at least a quarter of the health care funding to the province instead of the 11% that we are receiving now?

The federal government likes to make an argument that they did not cut health care funding, but one only has to look at their election platform of 1997 where they admit that they cut health care funding despite this phony tax point argument, an argument, I might add, that has been called meaningless, according to CIBC Wood Gundy economist Jeffrey Rubin. I quote from the Liberal campaign book, "It is a fact that, during our first mandate, this government reduced transfer payments to the provinces."





Where do these transfer payments go, you might be asking? Into health care, into the hospitals, nursing homes, health units and the providers of this service in Ontario.

While federal Minister Rock talks about improving access to doctors, Ontario is doing it. Rock talks about expanding home care and community care; Ontario is doing it. Rock talks about health care reform; Ontario is doing it. I would like to thank Mr Rock for admitting the mistakes of the past, but I would encourage them to correct them. The citizens of Canada and the province of Ontario expect and deserve more from their federal government.

**Mr Rick Bartolucci (Sudbury):** Thank you for allowing me the privilege to offer a few comments with regard to this motion.

Because there is an amendment to the amendment of the main motion, the people of Ontario should know that under the rules we will be able to debate the amendment to the amendment and then the amendment and then finally the motion, so every member in this House will have ample opportunity to put their point of view forward. The only thing that could ever stop that would be of course if the government invoked closure on their own motion. I would hope that the government wouldn't do that, which would allow every member in this House--103 members--to ensure that their points of view are made clearly, succinctly, and certainly with the best interests of their constituents in mind.

First of all, I'd like to talk a little bit about the Lankin amendment. In general, the Lankin amendment simply states that we have to ensure that we're opposed to privatization in our health care system; that we are opposed to two-tier medicine in this province. Certainly I'll be supporting this type of motion because I see what is happening in Ralph Klein's Alberta. We all know that we don't want that to happen in Ontario, so the safeguard here is if we support the Lankin amendment. It's not very complicated. It casts no blame. It just ensures that two-tier medicine won't come to Ontario.

Our Liberal amendment lays blame in both places, both at the federal government and at the foot of the provincial government. I'm in agreement with that because I've long argued, over the course of the last five years now, that we were making fundamental mistakes in health care in the province of Ontario.

Speaker, you will know that I get up here quite often and rant and rave and sometimes, hopefully, make salient points to ensure the government is held accountable for what I see are weaknesses in their plan to implement restructuring of health care services in Ontario. So I have no problem supporting the amendment by the Liberal Party. It doesn't cast blame; it ensures that both people, both governments, do their job.

I have some concerns with the main motion because the main motion is nothing more than trying to lay blame as opposed to doing something very constructive. I'm reminded of a television show, and I know it's a little bit corny to draw this analogy but the reality is there. There is a very popular television show, probably about six months old now, hosted by Regis Philbin called Who Wants to be a Millionaire? Mike Harris has been hosting a show for the last five years as well. The name of his show is Who Wants to Take the Blame? When the government created a crisis in education, Mike Harris was the first one to say, "Let's cast blame on the trustees, you know, those overpaid trustees, the ones who do nothing for education." When that didn't work any more, he said, "Let's blame the school boards." When that didn't work any more, he said, "Let's blame the parents." When that didn't fly, he said, "Let's blame the students." That went over like a lead balloon, so he found the group he wanted to blame and said, "Let's blame the teachers." The reality is that in Ontario the way we've avoided a crisis in education is because of the dedication and the support our teachers have given to our students.

Let's move on and talk a little bit about fuel prices. You remember that this past year, the summer in particular, Mike Harris was quick, when the truckers decided it was time they took action, to say, "It's the truckers' fault, they haven't negotiated good contracts," or, "It's the oil companies' fault, they're ripping off the consumers," or, "It's the consumers' fault because they're driving too much." The reality is that constitutionally and legislatively the only one who can accept blame for rising gas prices is the Premier, Mike Harris.

Let's talk a little bit about social services costs for only a second. Who did he blame then? Well, it was





the pregnant mothers on welfare. They drank too much beer. That's why social services costs were escalating. Let's lay the blame there because it's a popular thing to do. When it wasn't popular any more, he moved away from it.

Finally we come to health care. Four years ago Mike Harris said: "It's the nurses' fault. It's the doctors' fault. It's the hospital administrator's fault. It's the board's fault." We have a crisis in our health care system. We have to repair this crisis. We need restructuring in the system.

He blamed all the partners in education. He established a commission to go about the province and restructure. That commission has issued its final report. It lists seven recommendations with regard to system building. If time permits in this 20 minutes, I will deal with a few of those; if not, I will deal with them in the next 20 minutes I have; if I can't deal with them then, we'll deal with them in the final 20 minutes I have with regard to the way the amendment to the amendment and the amendment and the main motion are debated.

The people in my community know clearly where I stand. They told me clearly about five months ago: "Rick, we agree that the government moved too quickly. We agree, as the new health minister, Elizabeth Witmer, said, "We don't have a vision for health care."

They agreed with her then and they agree with her now when she has to stand up in the House and say, "There is no plan for health care." They agree with all that, but you know what they don't agree with? They do not agree with the government casting blame on the federal government. They don't agree with everyone around here blaming everybody else for the problems we have. And so, my community said: "It's time we stop fighting over health care. It's time we started fighting for health care."

1540

My community agrees with my leader that it's time we put away the sword. It's time we put away the guns. It's time we put away the rhetoric. It's time that we come together to find the solutions to the problems we have in health care in the province of Ontario, because we, as members of provincial Parliament, are mandated to find those solutions.

Is the federal government a player in all of this? There is no question the federal government is a player. They have a part to play in it. In fact, they have a very important part to play in it. We expect that they will live up to that part, and we want the 103 MPs in the province of Ontario to fight at the federal level to ensure that the commitment, the obligations and the responsibilities of the federal government are lived up to.

The reality is that we can no longer do what we've been doing for too long. We can no longer yell across the way to each other, calling each other names, saying, "You're to blame," "I'm to blame," "He's to blame," "She's to blame." No more. It's not going to fly with the public any longer. Not only my constituents, but I guarantee every constituent in the province of Ontario has said: "I've had it. I want my elected people to come together to work for a better health care system, to stop fighting over health care and start fighting together for health care to solve the problems we have."

My community is a very progressive community. It's not waiting for governments to come together. It's not waiting for the name-calling to cease. My community has decided, "If there's a job to do, we'll do it." But there are some limitations that my community has to face, and I want to outline a few of those to you and to the House.

To do that, I have to spend a very short time going back in history to the restructuring report and the direction it took. Certainly it wasn't the direction that the community wanted, but we've already had that argument so I'm not going to revisit that argument. But it did leave us with two of our three acute care hospitals closing. It did decrease the number of acute care beds. It did decrease the number of transitional care beds. It did decrease the funding in our main hospital, in the other hospitals that we're going to close. It did mean that nurses were laid off or fired. It did mean that one emergency room was closed and that there were longer waits in the one emergency room we had left. It meant all of those things. But we've already had that argument.



The direction from the Health Services Restructuring Commission was that we were going to enhance the facility we already had and the government would pay its fair share. Well, it took a while for my community to heal, to come to the realization that that's the direction we're going to take, but we did that. When we were fighting the last election, we weren't fighting it over the direction of the Health Services Restructuring Commission so much; we were fighting it over how are we going to be able to build this direction that the Health Services Restructuring Commission has mandated?

The burden on my community is enormous. Later in this talk I will try to outline some of the problems we have in our community, but for the next few minutes I want to tell you what our community did. Our community said: "All right. It's time that we put the war of words to bed. It's time that we establish an approach we're going to use to ensure that we have world-class health facilities at the end of the process." So a group of very dedicated, hard-working volunteers came together, and they did what the federal government couldn't do, they did what the provincial government couldn't do: They brought every partner to the table and they said: "If we all work together we can resolve the problem. If we all show we have a direction, governments will listen."

Under the very capable leadership of Gerry Loughheed Jr, who has decided to chair this campaign--and the campaign is called the Heart and Soul Campaign, because in essence health care is really the heart and soul of our community, in the present and for the future. So he brought together a wonderful group of individuals dedicated to the community and the region of Sudbury and northeastern Ontario.

I think of Joe Drago, for example, a retired high school teacher and principal, one who devoted his entire life to education and the betterment of students. He came; he decided that it was important that he become involved in it. I think of Jim Corless, a hard-working member of the community. Remember--I'm glad I'm given this particular 20 minutes during National Volunteer Week, because these people are all volunteers. They don't get paid anything for this. They're just sold on our community and they want what's best for our community and they're tired of the in-fighting they see among governments and within government.

I think of Mac Sinclair--Speaker, you know Mac Sinclair well--a hard-working individual who gives of his time at the Centre for Life, our new YMCA, who believes that health care is important in our community. Maureen Lacroix and Jackie Thoms, both hard-working people, both feel they have something to offer and they want to do it, with or without the help of government. They're assisted very capably by staff such as Judy Robertson, Allan Katz, Michelle Liebrock, and certainly hospital administrators or health care administrators such as Sister Bonnie MacLellan, who came down from Thunder Bay and helped at our new St Joseph's health care facility, and Dr Randy Bisset, who is world renowned with regard to the way he administers our regional cancer centre, and certainly very dedicated individuals like Dave McNeil from the Sudbury Regional Hospital, who's trying to put all the numbers together to make the numbers work.

They decided that we have to establish the plan. They went before regional council and they explained their plan and it was a beautiful plan. The place was filled. Regional council chambers were filled with people who were pointed in the right direction: the fruition of the dream, the completion of the plan, always with excellent health care facilities as the final target. Regional council was very supportive, but there was a part they had some trouble with.

They believe, as I believe, that the provincial government has an obligation to fund our health care facilities to a greater extent. They're not blaming the provincial government, nor are they blaming the federal government. They are simply saying: "Let's lay all the cards on the table. Let's look closely. Let's look at our facilities, our hospital." A very high percentage of cases that come to that hospital are not from Sudbury, because we're a northeastern referral centre. A large percentage of our cancer cases are from across northern Ontario, in some instances from across Ontario.

1550

The provincial government is going to be asked to come to the table with some more money. We're not coming down. My community--it's political representatives led by regional chair Frank Mazzuca--but





certainly we'll be supported; and I'm sure Sudbury Mayor Jim Gordon will be taking a lead in this because he was very vocal. He was not throwing stones at the government. Nobody around that regional council table was throwing stones. They wanted, though, a greater commitment on the part of the government of Ontario, Mike Harris's government, to come to the table.

Hopefully before the end of April, this committee of politicians, community volunteers and community leaders will be coming to Toronto and they'll be meeting with the health minister. Councillor Doug Craig will be explaining some of the factors that she may not be aware of with regard to what our catchment area is. Certainly Jim Gordon, the mayor of the city, will be meeting with Jim Wilson. He will be asking that the minister look at the potential for a broadening of our economic base through a donation from the provincial government in that particular area. Austin Davey, I'm sure, will be dealing with Minister of Northern Development and Mines Tim Hudak. At no time will they be throwing stones. At no time will they be casting blame. The only thing they will be asking is that you understand that our community cannot sustain a \$45-million community campaign. It is virtually impossible for us in our community, given the economic factors surrounding a resource-based economy, given our population, given the present employment situation we have in Sudbury and in our region, to sustain a \$45-million community campaign. So our local politicians and our community leaders will be coming to Toronto and all they will be asking for is a fair deal.

I've only got 48 seconds left, but I'd like the House to know that in my next 20 minutes, whenever that may be--and I hope the government doesn't invoke closure--I'll be talking a little bit about some of the horror stories that have evolved through the restructuring process, and how they could have avoided it, and the concerns we have with physician shortages. But finally, as my time winds down, I want to say that I am totally in support of the Heart and Soul Campaign of our community. I'm proud of that team and my community for taking a proactive approach, a very positive approach to solving the problems we have with our health care facilities in the city and region of Sudbury.

**Mr David Christopherson (Hamilton West):** I appreciate the opportunity to speak to this resolution. Obviously, one of the things that I want to do in the time that is afforded me is to not only discuss the macro issues, as many of my colleagues have, but to also speak to the implications in our communities and the impact on individual citizens and our families in terms of what all these cuts and the squabbling between the different levels of government are causing on the streets of communities in Hamilton.

I find it a bit hypocritical that the Harris government now wants to make health care funding the absolute number one priority. Nothing else matters. This is the top priority, and yet just a couple of months ago the federal government announced they were introducing their budget and the Ontario PCs ran ads effectively lobbying the government, trying to generate public support to put pressure on the federal government to take a certain course of action.

Given what's happening here today with this resolution, listening to the Premier speak, listening to Health Minister Witmer speak, you would think that when you checked back you would find that the ads they had taken out were indeed urging the federal government to make health care funding an absolute priority in terms of where the federal government ought to place the surplus funds they now find themselves in possession of. But, like many things with this government, what you'd expect, what they say and what the reality is are entirely different. They did not run ads urging the federal government to make up the money they've cut in transfer payments for our health care system. No. Their top priority was more tax cuts. That was the priority.

I want to say to the federal Liberals that, much to their everlasting shame, they succumbed to that pressure. I see one of the cabinet ministers across the way giving the thumbs-up. They love these tax cuts. Do you know why? Because they don't need to worry about what happens if we go to a privatized system and you only manage to get what you really need by coughing up the money. Why? Because they've already got lots of money, and with the tax cuts they've given, these folks have got even more money. Unfortunately--and the minister and his colleagues fail to take this into account--the vast, overwhelming majority of Ontarians don't have that kind of money. The only way the majority of Ontarians are going to have the health care system we need is to provide it through a public system.

When the federal government brought down their budget, for every dollar they gave for tax cuts, they





put two cents in health care. Talk about putting in your two cents' worth. That's how much of a priority it was for both these governments. Both of them are listening to the cries for tax cuts above and beyond the critical need they now say consumes them in terms of making sure they receive adequate funding from the federal government to provide Ontarians with the health care system they deserve. What hypocrisy, and then to spend these past few months between the federal health minister and the provincial health minister squabbling back and forth.

It's our sense in the NDP caucus that, at the end of the day, what people are looking for is some kind of solution. I know the government will say, "Just support our resolution; there's the solution." At the end of the day, who is not going to be in favour of providing sufficient funds from the feds to the province for health care? But it is so filled with hypocrisy.

When I talk about taking the macro and then talk about what's happening in communities, you know I cannot deal with the issue of health care without talking about what's happening in my own home town of Hamilton. Because of the money that this government has cut from hospitals--yes, the overall health budget is up, but then so is the demand on the health care system, so are the number of people demanding services, the type of services being required as a result of our generation getting older. Of course there is going to be an increase, but when you look at it on a per capita basis, we're behind, overall, in health care.

In the hospital sector, they cut out \$800 million. In terms of the Hamilton Health Sciences Corp. we're looking at the Henderson site being basically demolished and the cancer care centre moving away from there, at a cost of \$100 million, by the way, a brand new building that was just opened a few years ago at a cost of over \$40 million. We still haven't figured out how that lunacy is supposed to make any sense. Out of the Hamilton Health Sciences Corp budget, they've been facing a total of over \$40 million in operating grants in terms of the funding they get from the provincial government. And what is the deficit that's caused the government to go upside down and twirl all around and now come in and bring in a supervisor? What has caused all of this? A \$40-million deficit. Well, let's see now: \$40 million cut from the budget by the provincial government and a \$40-million deficit. I wonder how that happened. Yet the minister insists on standing up and saying that there have been no cuts. She's actually in Hansard saying there have been no cuts. The fact of the matter is that there have been cuts. That's why I've always maintained that looking at these two numbers is so important. Give or take \$1 million or \$2 million, it's \$40 million on each side of the ledger.

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I and my fellow area MPPs meet on a regular basis with the board of the Hamilton Health Sciences Corp. They've been telling us for some time that because of the cuts--and other things, but definitely because of the cuts--they're running deficits. But they said they were going to make sure that the health care needs of our citizens in Hamilton were the first and top priority--not some hypocritical, "This is our priority," like the government saying, "Health care is a top priority," when what they're really pushing is tax cuts. This board said, "Our priority is the health care needs of the community."

What did the PricewaterhouseCoopers report come out with in regard to that? Well, somehow this is meant to be a criticism, but it sure isn't, as someone who represents tens of thousands of Hamiltonians. Listen to this, page 32 of the PricewaterhouseCoopers report: "This is reflected in the board placing a higher priority on meeting the needs of patients who request HHSC's services versus fiscal accountability and solvency of HHSC."

I realize that you cannot say money doesn't matter, but you also can't have it both ways. If your revenue is being cut and you have not only the same service demands on your hospital but increasing demands, you have to make one of two choices. You'll either run a deficit and provide the service and work out with the government and the proper officials later how you manage this fiscal issue, which, by the way, was caused by their cuts in the first place, or you say to Hamiltonians when they bring a sick child to the emergency ward: "Sorry. You're the point where we have to cut off today, because we don't have enough money to pay for servicing your child in terms of their immediate health care needs."

This board--rightfully, in my opinion, and I was proud to stand behind the board up until the recent



announcement about what they were going to do with Henderson. I was proud to stand behind them when they said that the health care needs of those Hamiltonians who are at the doorstep of a hospital will be first. That's not a criticism. That's the way it ought to be. In fact, that's what this government says they do. They say that dollars don't matter, it's the health care that matters, that they'll make sure there is enough money to meet the need. That's exactly what this board did, and now they're being criticized for it.

The point was even made twice. On page 42 of the review it says, "Interviews conducted with senior managers reveal the following key issues," and the fourth bullet point is, "Community needs clearly outweigh the responsibility for fiscal accountability when the senior team is making decisions." Well, as long as the senior level of government is cutting funding, this had better be their decision, this had better be their policy, because I can't imagine anybody in this place of any political stripe saying that it's OK not to provide hospital services that are needed because there's not enough money.

The dangerous game that's going on here--and this is where the federal Liberals have got to start paying a lot more attention to the implications of the positioning they're taking vis-à-vis the provincial ministers of health. By ensuring that provincial governments are not receiving their fair share and what they need to provide health care services, you give the Kleins of this country a green light. It also probably feeds the belief of quite a number across the way on the government benches that privatized health care is OK. I would assume that if money is not a problem, maybe it is OK, but it's sure not OK for the average person.

I don't really understand how it's supposed to save us money if the government, through the Minister of Labour, when he says that he cares about workers, making sure they get fair pay for work and fair benefits and a safe workplace--how it makes any sense that privatizing something is going to save us money in the general public. It's another one of those, "You can't have it both ways." If you privatize it and it's going to cost people less, then where are the savings coming from? Nothing magical happens when it goes from public control to private control. There's no magic transformation there.

Thanks to this government, in many cases collective agreements go into the wastebasket. You put that legislation in place so that if something is privatized there's no collective agreement. What does that mean? It means they can pay whatever wages they want. So they're going to pay nurses a lot less, they're going to pay support staff a lot less, they're going to pay the ambulance drivers a whole lot less. That's how they're going to save money. How does that help my community in Hamilton if you take a few thousand people who are earning at least a half-decent wage and cut their incomes by 20%, 30%, 40%, 50%, which means there's that much less money in our local economy? How is that supposed to help us?

The other way you make profit, after you've done your damage to wages and benefits, is that you provide less service. Yes, that will save money, but then we're back to the same old dilemma: You're saving money but at the expense of the health care service.

If we hearken back to the wisdom of John Snobelen, the then Minister of Education, who said to that room full of Ministry of Education bureaucrats, "What we need to do is create a crisis"--I'm paraphrasing--"to justify the action we're going to take," that is what I fear is going on. At the end of the day they'll try to convince Hamiltonians and others across Ontario that because there's this huge problem they need to do something and that something is, "At least let's talk about privatized health care." They create the crisis.

That's what they've done at Henderson. Would we still have fiscal challenges? Yes. Would we still have major staff challenges in terms of doctor shortages? Yes. Would we still have a problem in terms of ensuring that there are alternative levels of care beds, meaning long-term-care beds, to move people out of hospitals into these beds so you can free up those acute care beds for others who need them? Yes, those are still problems. But those problems have to be dealt with by the provincial government. Henderson hospital doesn't decide what the policy is around providing doctors for our communities and they aren't the ones who are designing a long-term-care system, which they're also privatizing. So at every front where we look at why the Henderson crisis is in front of us, it all comes back to this government.





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Yet this Minister of Health continues to stand up and say, "No, there have been no cuts, and this is all about bad management." Has the management at Henderson been perfect? No. Has the management anywhere on this planet been perfect? I think not.

Now we've got the sight of the minister, as if she had no involvement in anything to do with Henderson, standing back and saying, "I'm going to send in a supervisor because you folks are all irresponsible and can't be trusted to do the right thing."

The reality is that the entire operational review and the recovery plan, which this government still refuses to table, had as full participants senior ministry officials from the Ministry of Health. In the absence of any kind of guarantee that bringing in a supervisor or an overseer so that Henderson emergency and the cancer care centre next to it will stay open, it's meaningless. It doesn't mean anything, other than one does get to the conclusion that you've obviously gotten into a process to buy some time. What's going to happen during that time? There'll be a by-election. That's what's going on.

The minister, in her own news release, said--and I'm down to my last two minutes--"It is unacceptable that Hamilton Health Science Corp's proposed recovery plan did not take into consideration the needs of the residents on the Hamilton Mountain and surrounding communities." The Ministry of Health was a part of putting together that recovery plan. They were involved in every step of the development of that recovery plan and that's why she won't table it, because then she has to either lie or fess up that she was a part of it.

**Hon David Turnbull (Minister of Transportation):** David, can you speak up a bit?

**Mr Christopherson:** You tell me to speak up. Do you know what? We're a little tired that no matter what we do, your government won't listen. So at the very least, you're going to have to listen.

But the fact of the matter is that this minister and her officials are a part of that plan and that she said it's unacceptable that there's not consideration for the community. The only thing we've been concerned about at this stage, because it's the only thing that's been in the bull's eye, is Henderson; ergo, the minister ought to announce that Henderson's going to be saved and that's why the supervisor's being brought in. That's not what's happening.

The board of the Hamilton Health Sciences Corp, for all the challenges they face, have done the best they can. I think they made an absolutely critical strategic error in saying they're going to close the Henderson, or do anything else for that matter, in advance of the operational review and the recovery plan being tabled, which would mean that the ministry would have to say whether they're onside or not. It would be hard to be offside when you were a part of developing it.

But for all of that, they are good people who have done the best they can and they don't deserve to be treated this way. They've been hung out to dry, just like the broader community has been hung out to dry. If we don't get this funding issue resolved, privatization is what's coming next. When that happens, just look down the road five, 10, 15 years: The Hendersons of our communities will be privately owned.

**Mr R. Gary Stewart (Peterborough):** It's my pleasure to speak to the Premier's resolution on health care. It's interesting to note that the number one priority with our government is health care and it's the only thing that is the same for everybody in this province. I feel very disappointed that the federal government does not believe that health care should be a priority as well.

As I listened to the opposition members in this House, they seemed to be standing in their places and not suggesting that we try to get the fair funding from the federal government that this province deserves, and not only this province but all of them in Canada. I ask the members of the opposition, are they more interested in protecting their Liberal cousins in Ottawa or are they more interested in protecting the people of Ontario and indeed the people they represent?

I could use a whole bunch of clichés here today, like "Talk versus action," and "Put your money where





your mouth is," and "Facts, not fallacy," but I won't use those because I have no intention of blaming anybody. What I am trying to suggest is that there were a great number of dollars, to the tune of \$4.6 billion, taken out of transfers by the federal government of this country that I believe should be put back into our health care system, and I believe most other Ontarians believe the same thing. For that reason I find it very difficult to listen to the rhetoric, or whatever you wish to call it, from across the House of those who don't want to protect health care for the people of this province.

Now let's talk about priorities. Let's talk about protecting health care for Ontarians. As a government, and I include all sides, we must ensure that all Ontarians can continue to depend on a health care system that is accessible, affordable, accountable and sustainable in the long term, and that seems to be one of our problems. I can't understand why past governments did not plan in the long term for health care. I don't know about you folks, but I have got a little bit older. I suggest to you that 10 or 15 years ago, when the opposition was in power, they must have had a moment when they did not think anybody was ever going to get older. We didn't have to plan for long-term health care.

Our health care system in this province and throughout Canada, you know and I know, faces many challenges. But at the same time we also have many opportunities, and we should not forget that. We should work in co-operation with all levels of government, with all parties, void of political bias, to make sure that health care will be sustainable in this province.

On the medical front, there are several revolutions going on simultaneously: in new technology, new equipment, new treatment and, of course, new drug therapy. This includes everything from multiple organ transplants and new treatments for cancer to less invasive cardiac surgery. In my riding alone, we've been very, very fortunate to obtain some of this new technology. For 15 years Peterborough had tried to get a dialysis unit. Within six months of our government getting elected and getting into place, we had a dialysis unit in the city of Peterborough. Our government reacted. Since then we have obtained a cardiac care unit, which will open later on this month. They had been trying for 12 years to get that. Also the MRI, which is also coming to Peterborough, they had been trying for some eight to 10 years to get that particular unit.

If you look at the types of reform and the things that our government has done in the last five years, I think it's a tremendous record and it's a tremendous indication of the type of priority that we hold for health care. For example, last year we expanded the number of breast screening sites in Ontario to 48, an increase of 12 sites in just one year. We have invested an additional \$155 million into cancer care since 1995. Unfortunately, in this province we have a very aging population; also, the incidence of cancer continues to grow at about 3% per year. We have done some of these things, albeit we have a long way to go, in spite of the cutbacks of the federal government.

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As I mentioned, new technologies and new treatments are very exciting, but when you combine them with the increasing demands of our growing and aging population, they raise some larger questions of accessibility and affordability. As I mentioned, between 1995 and 1998 the demand for dialysis grew by 30%. There has also been a major increase in the last couple of years in cardiac surgery and cardiac management.

One of the reasons I have mentioned some of these things is that we listen to what's coming out of the federal Minister of Health's mouth, suggesting that the provinces--not only Ontario but the provinces across this great country--have to start looking at reform. Reform has been an ongoing thing, certainly in this province, for the last four years.

As I said, we have major changes. The demographics are changing. We've got to prepare for that type of future, and it appears without a great deal of additional help from the federal government. In 11 years, for instance, the post-war baby boom generation will be reaching the age of 65. Thus, the demand for health services will only continue to increase, and again, it appears without additional help from the federal government.

What will that mean for health care costs? Let me put it in perspective for you. Today we are spending



\$20.6 billion. Half of that money is being spent on 12.6% of our population, and that is people over 65 years of age. So I think you can appreciate that our growing and aging population will bring tremendous financial challenges to the health care system in the years to come, not only in our province but every province across this great country.

Again, I have to emphasize that the federal government has got to realize that they have got to be part of the solution in health care funding.

It's interesting to note that the Ontario Hospital Association recently noted in their pre-budget brief, and I quote: "Today the Internet is accelerating the globalization of health care services and exposing the public to new options for diagnostics and patient care. The public will expect to have access to modern medical equipment or treatments that are saving people's lives in other jurisdictions. Customers' needs and expectations will increase."

I hope the federal government realizes that is a thing that is definitely going to happen in the future. We're not asking for more or less than what we deserve; we are asking to get what we need and what is fair to us.

If you notice, it's not only Ontario and Canada that have a health care problem. A number of months ago I had the opportunity, over a couple of weeks of holidays, to read a lot of newspapers. Health care is a problem all over the world and we have to be prepared to solve it. We, at all levels of government, have to be prepared to be part of the solution.

I can assure you that Ontarians are concerned--certainly they are in my riding--about the future of our health care system. They want to know that the system will be there for them and for their families if they need it. They want to be assured they will have access to new treatment, new services and new drugs.

The people of Ontario also know that our health care system is a tremendous asset. It is a competitive advantage that contributes much to the strength of our economy. Ontarians want that asset protected. They want their health system to be sustainable, accessible and affordable in the long term.

The system we inherited in 1995 had for too long seen the hospital bed as the answer to everyone's needs, even though today more than 70% of surgery occurs as day surgery. Unfortunately, community-based initiatives such as services and long-term-care beds had not been addressed until our government got into power. Certainly, when we announced 20,000 new long-term-care beds in 1998, there had been no construction of any long-term-care beds in the previous 10 years.

Mr Rock says, "You should start reforming the health care system." Ladies and gentlemen, Mr Rock should listen and see what the people of all provinces have been doing in health care across this great country.

I suggest to you that this government has put those reforms in place. Piece by piece, step by step, we have put in place the necessary elements of a modern health care system in response to the needs of our population, and yes, we've got a way to go, but we'll continue moving forward.

One of the reforms that has happened is we're shifting the focus from sickness to wellness, as we must if we are to sustain our health system. We're promoting injury prevention and health promotion. We're investing in early intervention for children and their families through programs such as our pre-school speech and language programs, our Healthy Babies, Healthy Children program, all of these reforms at major cost, major increase to this province. We are doing it in spite of cutbacks from the federal government. As I mentioned, we want no more, nor do we want any less.

Because we restructured the hospital system, we have been able to make major reinvestments in our hospital facilities and in long-term care. There's presently \$1.2 billion worth of hospital construction underway and we plan to spend another \$2 billion to meet the needs.

That brings me to a health care problem and a hospital problem that we have in the riding of





Peterborough. We have a new name for our hospital. It's called the Peterborough Regional Hospital, from the old name of Civic Hospital. We have a new name, but we need a new hospital. Why? Because our hospital has had very little refurbishment since 1947--a little bit in 1962 and a little bit more in 1988. Our inpatient rooms are too small to appropriately accommodate modern medical equipment. We use the old crank beds because the rooms are not big enough for electric beds. We have to use those crank beds getting patients from one floor to the other because the elevators are not big enough to take the new beds. If a person has a cast on one's leg and has to use a wheelchair but also has to use the washroom, they must leave the door open in that washroom. Because of their leg, there's not enough room to go to the bathroom.

That's the type of hospital we have at Peterborough. We need a change. We need a new one. We don't have sufficient space for nurses and doctors in the wards. We have a \$250,000 piece of equipment that sits outside our operating room which gets banged constantly by gurneys and beds because there is no room for it to be put any place. But we cannot get this type of new hospital or improved health care unless we have a commitment from the federal government to put the dollars they've stolen out of this province back into the system.

We have established that it's about a 70-30 split. As you may or may not know, it used to be a 50-50 split between the community and the province. When we got in to form the government it was changed to 70-30. I commend the people of Peterborough and area because they are ready to put up their 30%. The county, the city councils and the community have approved that there will be a levy put on their property tax on a yearly basis for the next 25 years. We're committed, and I suggest to you that the federal government better soon get committed to enhancing health care in this province.

1630

Fortunately for this province, we have a strong and growing economy. We also have a strong Premier. We have a strong and caring health minister. The reason I make the comment about a strong Premier is the fact that Premier Mike Harris has led the charge towards Mr Rock, to somehow convince this individual that the dollars they have taken out have to be put back in.

We have been able to increase our health care spending from \$17.4 billion in 1995 to \$20.8 billion today in spite of the cutbacks of the transfers from the federal government. Why have we been able to do it? Because we have a thriving economy that has seen the creation of 665,000 net new jobs since 1995. The tax cut is working.

However, while we have increased health care funding, as I said, the federal health cuts have cost Ontarians \$2.8 billion since 1993. Our taxpayers have had to make up the difference in order to protect and preserve health care in this province. Moreover, we have committed to spending another 20% over the next four years, to an unprecedented \$22.7 billion.

I want you to think for just a moment about those transfer payment cuts and the impact they have had not only on Ontarians but on all Canadians. In simple terms, since 1993, Ottawa has been forcing Ontarians to pay a major part of their health care bill twice. The people of this province paid their taxes to Ottawa, but unfortunately Ottawa did not return all of the health care money. Then, as a result of those federal cuts to health care, those same Ontario taxpayers have had to pay--

**Mr Richard Patten (Ottawa Centre):** On a point of order, Mr Speaker: The member across continues to make disparaging comments about my community, Ottawa. It is not Ottawa. I believe he's talking about the federal government--

**The Acting Speaker (Mr Michael A. Brown):** That's not a point of order. The member for Peterborough.

**Mr Stewart:** Ottawa did not return all of the health care money and, as I say, Ontario taxpayers have had to pay twice, because they've had to pay again for the needed services that could be provided for people in this province.





I suggest to all members of this House, and indeed the member from Ottawa, that we go out of our way to make sure that Allan Rock, the federal minister, and the federal government put the transfer dollars back into health care as quickly as possible.

**Mrs Marie Bountrogianni (Hamilton Mountain):** It's a privilege to speak on any debate with respect to health care, particularly since these past two months have been very significant ones for health care in my community in Hamilton. My colleague from Hamilton West talked about the Henderson hospital situation, and I want to give the House some background because you'll be hearing quite a bit about this in the future.

Yesterday, the minister took a very severe step in recommending a supervisor go into the corporation. There's a 14-day waiting period and if this indeed occurs, I believe it's only the third or fourth time in this province's history that this has happened.

One of the promises the minister has made is a promise of consultation with the community and with the various stakeholders, and I do hope that occurs. Indeed, there has been in the last three months an informal consultation process, and I'd like to summarize some of that consultation and have it on the record, both for the minister and for the opposition.

In 1996, the Health Services Restructuring Commission came to Hamilton-Wentworth and recommended that the corporation's three acute care sites remain open. They reviewed the demographics, they reviewed the need, and the commission recommended that the three acute care sites remain open. Indeed, in 1992, a cancer centre was built at a cost of \$41 million beside one of those acute care hospitals, the Henderson, precisely because it was to remain an acute care hospital. This state-of-the-art centre, at \$41 million, needs an acute care hospital and indeed will move if the acute care hospital is downgraded, as was proposed by the corporation. In fact, there was an expansion to occur, and that is on hold until all of this is resolved. This has caused a lot of insecurity among cancer patients and physicians, adding to an already untenable position with respect to attracting physicians to the area. According to the corporation, we are short about 80 physicians in the Hamilton-Wentworth area.

The proposal to downgrade the Henderson from acute care to urgent care is unacceptable for many reasons. One, it is the only acute care hospital on Hamilton Mountain. For those who aren't aware of the geography of the Hamilton region, it truly is an escarpment and it's truly difficult to get down the escarpment when the weather is bad. As well, during certain traffic periods the traffic goes only one way up on some of the major routes.

One of the areas of waste, according to the operational review, is the fact that long-term-care patients take up acute care beds. That's true. They take up these beds for months and months when really they should be for patients who need them for a few days or weeks. In 1998 we were promised almost 1,300 long-term-care beds or alternative care beds, and we're still waiting for those. The funding has been approved; they still haven't been built.

I understand that these things take time; I was on a hospital board once before. This isn't a criticism, but it is a reality. These beds take time to be built. Therefore, to close down 95 acute care beds, as was proposed by the operational review, before the long-term-care beds are built would be disastrous. We already have long waiting lists for long-term care and home care. We understand that those patients belong in different settings, but until those settings are built, it would make an already bad situation untenable.

I have here a letter dated April 6 from the director of the cancer centre, Dr George Browman, referring to the possible downgrading of the Henderson hospital, to the staff of the corporation. I'll just read a couple of sentences of his letter:

"It is Cancer Care Ontario's position that a cancer centre must be affiliated with and located in close relation to an acute care hospital with a full range of in-patient services. This principle has been applied in all recent decisions around the location and building of cancer centres throughout the province. We have been given a strong direct indication that the Ontario Ministry of Health and Long-Term Care shares this position as a matter of policy."



Therefore, if the acute care centre is downgraded to urgent care, this \$41-million centre will have to move. Not only will that \$41 million be thrown out the window, \$41 million of taxpayers' money, but estimates of moving the centre are anywhere from \$50 million to \$80 million. That's \$130 million. The savings of the downgrading of the ER is \$2 million. It just doesn't make any sense, not from a clinical point of view and not from an economic point of view.

1640

There are also legal implications to downgrading the only acute care hospital on Hamilton Mountain. I have a letter--again I will only read a couple of sentences from it--from the Canadian Medical Protective Association. It is in response to a letter from the physicians in Hamilton about this very issue, about transporting critically ill patients to a hospital down in the city from the Henderson if the urgent care isn't sufficient. That letter states:

"We have concerns about issues regarding transfer of critically ill patients and the inability to provide ventilatory support. In addition, full cardiac support when necessary, including inotropic support and invasive monitoring, should be potentially available when medically necessary."

This is the critical point here: "There isn't any reliable method that can be used to scientifically, medically screen out patients prior to surgery to put patients into true high-risk and true low-risk groups. That is the problem with urgent care versus acute care, and the relationship between that and surgery. As such, the idea of splitting patients between sites is unacceptable to us. In addition, we would feel that it is unacceptable to us to consider that our current quality and standards of care could be compromised by the changes proposed." This is from the chief of surgery from McMaster University to the Canadian Medical Protective Association.

The response was: "Patients should be informed, perhaps as part of their pre-operative consent, of the potential risks for being transferred to another hospital in the unusual event that they develop unexpected post-operative complications." In other words, after an operation, you need an emergency room, you need acute care facilities.

The letter finishes from this Canadian Medical Protective Association: "Clearly, an investigation would have to follow any difficulty in accessing critical care beds in a timely fashion in the event of a demand for such services. It may be necessary to even transfer patients to Toronto if closer intensive care unit beds are unavailable."

Is that what we've come to, transferring critically ill patients to Toronto because there aren't enough beds? Yet another reason why we need an acute care centre hospital on the mountain.

With respect to consultation, we've had nothing but consultation in the last two months, albeit informal. We've had over a thousand e-mails. We had a town hall meeting March 9, where 1,200 people were able to stay; hundreds more were turned away because of fire regulations. During that town hall meeting, people made presentations, stakeholder groups made presentations. That document has been given to the Minister of Health. I urge her to read it carefully. There are some very good proposals there to this overwhelming challenge in Hamilton-Wentworth.

We have 75,000 signatures--that must be a record of some sort, 75,000 signatures in less than a month--saying this is not appropriate. Although the majority of the signatures are from Hamilton Mountain, they also extended outwards because the acute care hospital on Hamilton Mountain also services other parts of the region: Glanbrook, Stoney Creek, Ancaster, Dundas.

As part of one of our events at the town hall meeting, physicians gave a proposal. Ambulance care managers said that it was inappropriate to transport patients. Also, it came to light that this would be an extra cost for the region of about \$700,000, the extra ambulance driving and transporting patients from the Henderson to the other sites. From a selfish point of view as a representative of Hamilton Mountain, it didn't make sense to us politically to have three acute care centres in the city and none on the mountain, which is the fastest-growing part of the region. We are expanding the south mountain





exponentially. The airport, as you may have heard, will also be expanding, meaning more expansion, more business, but also, unfortunately, more accidents, therefore increasing the need for that acute care centre.

But I want to be clear: I'm not advocating that any of our emergency rooms be closed. I'm just talking from Hamilton Mountain's point of view, or as one of the media in Hamilton likes to say, "If you're from another planet and travelling above Hamilton, does it make sense not to have one on the mountain and to have three downtown?"

Having said that, even with three downtown and one now on the mountain, four, Hamilton hospitals have also been hit by the emergency room crunch gripping Ontario. During the month of December, Hamilton's ERs were on critical care bypass 19% of the time, which means that 19% of the time they had to refuse even the most critical of patients. Although these are the formal statistics, I happen to know that sometimes they take these critical patients even if they are on critical bypass, because they're professional, they're caring, and they know that but by the grace of God go they, and they do take care of these patients but under amazing conditions.

During the first week of January, which of course is heart attack season and accident season, it's not uncommon to have an increase, but it was 49% of the time that Hamilton's ERs were on critical care bypass. An obvious question is, why are we speaking about closing any of our emergency rooms? That is a question that was asked and answered by this government's health care commission, hospital commission, in 1996, and the conclusion was, no, none of the emergency rooms should close.

We have a physician shortage crisis in this country. Hamilton isn't any exception. This whole insecurity is making it even worse. Who in their right mind would want to transfer to hospitals when they're in this crisis? The doctors who are there are committed. They want to stay there. We do need to do something very quickly. It's heartening to hear that there is this task force, but we would like an update very quickly on what is happening, just to give us some hope that progress has been made on recruiting doctors. All levels of government were short-sighted 10 years ago when they reduced the medical spaces in medical schools.

Perhaps some of the short-term solutions that the minister was alluding to might have something to do with opening up, albeit on a short-term, extra spaces so that within three to four years we have more doctors. Maybe she was alluding to a better relationship with the federal government where some of the immigration policies can be looked at, because I'm sure we all know of people who are driving cabs out there, who really should be in operating rooms. I do hope and encourage that this enhancement of the relationship between the provincial and federal government be improved. We need to work together. It's health care we're talking about.

Being the critic for colleges and universities, I can't help but use this as a pitch to re-look at the deregulated tuition fees. It's up to \$12,000 a year now to study medicine. One of the arguments is that they'll make a lot of money when they finish and therefore they'll be able to afford to pay down the loan. That's true for those who can get there. For those who are very smart, in their 90s but can't get there because of financial difficulties--they can't get the loans; they don't have the kind of family backup where they can even get the loan--that is another barrier. I would hope that both levels of government will look at that.

When I read through the operational review of the Price Waterhouse company, the funding issues were staggering. The challenges are staggering in my community with respect to our hospitals. I do hope, whatever happens, that we work together to solve this problem in a non-partisan way. Whether a supervisor is appointed or not, whether in the next two weeks ultimate solutions are discussed or not, my community will always have my support and my voice on this issue.

I would like to spend the last five minutes of my time to speak about another issue that my colleague from Samia-Lambton brought to this House's attention last week. This issue is extremely important to me, not only as a member of provincial Parliament, but as a mother of a girl, as a daughter of an aging mother and as a woman myself. I didn't know--and I have been in the health care and education fields for 17 years--for example, that in Canada there isn't any mandatory accreditation of mammography, of





mammograms. In other words, when women go--and it's a very stressful test--to see if potentially they have breast cancer or not, these units may not necessarily be checked by an inspector basically.

I'd like to give a little background, if I may. Breast cancer is the most common form of cancer diagnosed in Canadian women. One out of every nine Canadian women will develop breast cancer during her lifetime. One out of every 25 women will die from this disease. In fact, in Canada, we are second in the world with respect to fatalities to breast cancer in women. It was estimated that in 1996, there were approximately 18,600 new cases and 5,300 deaths attributed to breast cancer.

At present, the only proven strategy to reduce deaths caused by breast cancer is early detection and mammography. Mammography is a very important tool in early detection. Not only is it used to screen women in the absence of disease symptoms, but it is also used to diagnose the disease. In Canada, breast cancer screening occurs in provincial organized breast cancer screening programs, private clinics and hospital-based mammography clinics. Analysis of the health survey results indicates that nearly 60% of women over 35 had a screening mammogram in the last two years. This is equivalent to 1.5 million mammograms annually. However, most of these machines are not accredited, and we don't know when we go which ones are or are not. There isn't even a posting that says, "This machine isn't accredited," or one that says it is.

1650

This was a problem in the United States seven years ago. They did a survey and they found out that a large percentage of their machines were simply not giving valid tests and therefore could be giving either false negatives or false positives, both very scary. A false positive is also scary. Being told you have cancer when in fact you don't is actually, in my mind, a crime to that family.

Other provinces have made accreditation mandatory--not as many as should, but Alberta has and so has Quebec; we haven't here in Ontario. Again I encourage both levels of government to get together on this issue. It's one that affects 51% of the population.

I'll give you an example of how staggering the statistics are. Only 35% of mammography facilities in Canada have joined the voluntary accreditation program, and 40% of these units are accredited in Ontario; in other words, 60% in Ontario aren't.

The act in the US seven years ago mandated accreditation of these units. Why did they do that? When they surveyed their facilities, 90% of the images did pass today's image quality criteria but 50% had quality control problems with film processing and handling that could affect diagnoses; in other words, half of them. If we transfer that statistic to here in Canada, we're in trouble. This is something that can be fixed. It's not one of those insurmountable health challenges that we're all faced with.

The Radiation Protection Bureau brought together all the key stakeholders for a consultation on the issue and made recommendations to the Minister of Health at the federal level. I do hope the Minister of Health at the provincial level heeds these recommendations as well. We need public information and education. I, for one, when I go for my next test, will ask, "Is this machine accredited or not?"

Research and professional training: This is a lecture in itself, but most of our doctor training does not include training in cancer. Research should be done within one organization seen as the knowledge centre. A critical mass evolves when you do research in one centre and when the funding is focused in one centre.

We met yesterday, with the health critic and with my colleague from Sarnia-Lambton, Mr Greenaway, the president and CEO of the Breast Cancer Society. This gentleman and his wife lost their daughter to cancer at the age of 38, years ago, and since then have committed their lives to raising funds, millions of dollars, for breast cancer. They are on a mission to have Canadian mammograms accredited across the country. I support them. I ask for this side of the House to support them and to support the minister at both levels.

**Mr Joseph N. Tascona (Barrie-Simcoe-Bradford):** I am very pleased to join in the debate on this



resolution. I can frankly say that, with respect to health care reform, this government has taken leadership. It's not about dollars and cents. It's about having a plan with respect to reforming health care.

Ontario is a leader in health care. It increased health care funding from \$17.4 billion in 1995-96 to \$20.8 billion in 1999-2000. In contrast, in 1999-2000, Ontario will receive \$1.7 billion less from Ottawa under the CHST than it received in 1994-95. This resolution condemns the government of Canada for cutting by \$4.2 billion the annual base payments under the federal program that supports health care.

At this time I want to talk about our plan for reforming health care. What it has been, as we've established, is that the federal government instead of spending their fair share, which is 50%, is actually spending only 11 cents on the dollar with respect to health care in this province. That's not the fair deal that was set out to provide Canadians and Ontarians with health care that meets their needs. There have been many provincial reform initiatives, and I'll just name a few: primary care reform, pharmacare programs, home care, long-term care, mental health and the restructuring of our hospital system. So when you hear the federal government say, "You're not going to get any money unless you have a plan," it's very difficult to take the federal government seriously and to think that they understand the situation. We do have a plan and we're implementing that plan. We're implementing that plan notwithstanding that the federal government has cut their transfers significantly and at the same time haven't come up with any initiatives of their own.

### *Interjections.*

**Mr Tascona:** Listening across to the other side, the provincial Liberals have done nothing with respect to this issue, no initiatives, but we have marched on.

As I said, it's not just dollars. Let's just look at my area, Barrie-Simcoe-Bradford, as you appropriately said, Mr Speaker, one of the fastest growing areas in this province. Actually it's made up of the city of Barrie, the town of Innisfil and the town of Bradford-West Gwillimbury. I may add that the city of Barrie is the fastest growing city in this province. We're very privileged to have a brand new hospital as of 1996 and to have the tremendous growth that we're seeing with respect to new people coming into our area and coming from all parts of the province. Because of the economic growth in our area and with the aging of our population, our hospital needs to expand, even though we got a brand new hospital in 1996. What's great about the restructuring that's been happening in this province is that it has resulted in my constituents not having to go to Toronto for services they would normally have to go there for. I'll name just a couple: breast screening for cancer, MRI technology and kidney dialysis--significant reinvestments for my area because my constituents don't have to go down to Toronto to get that treatment.

We're looking also to try to get a regional cancer care clinic, which would allow us to have state-of-the-art service to treat cancer victims and they wouldn't have to go down to Toronto to get the services they need. That's something we're working on. It's a five-year plan and it's something that this government has taken seriously. There have been other communities--for example, Kitchener-Waterloo--that have regional cancer care clinics. Certainly that's very important to them in providing the services they need to provide to cancer care victims in their area.

Also what's important to know is that there's tremendous investment in the health care of our community; for example, the Barrie Community Health Care clinic which has opened up downtown in the city of Barrie. It is a tremendous reinvestment, a much larger facility and more accessible for people. It's a part of our community health initiative in terms of educating the public about the health care services that it can provide and about their health, but also providing much-needed services to the community at large. Also, the community care access centre which started up under this government's initiative is serving our constituents well in terms of their transition into and out of hospital. That's another program we have implemented and it has done very well in Simcoe county.

1700

I'm very pleased to announce that in the next couple of weeks we're going to be seeing a seven-day emergency care clinic that will be set up in the south end of the city of Barrie which is going to service





my constituents for emergency care services. It's state of the art and it's going to be, from what I understand, the second of this type of clinic that there is in the province, and it's much needed. It will allow people to go to that clinic rather than have to go to the RVH emergency clinic. It will be staffed by the same doctors and medical staff who treat people at the Royal Victoria Hospital.

That is tremendous news because of the tremendous size of Barrie, but it will also serve people from the town of Innisfil. Speaking of that, we also have, as a part of my riding that serves my constituents in the town of Innisfil and the town of Bradford-West Gwillimbury, a tremendous investment in York County Hospital. The province has committed in excess of \$60 million towards the expansion of York County Hospital, another fast-growing area that needs the services, with investment in their birthing units and in catheterization. It has become the regional centre for the area of York region and Simcoe county. We've been very blessed with respect to the investments that have been made at York County Hospital. It will allow my constituents not to have to go to the city of Toronto to get their medical services in those specialized areas.

The investments that have taken place have been in the millions and millions of dollars in restructuring of services. That's something that is long overdue in terms of moving health care services to the people who need them and to where they live. That is tremendous news.

In our area, as I said, with the tremendous growth, it's certainly going to place even more pressure on the services we need brought here. We have a temporary kidney dialysis clinic. That's going to be made permanent, I understand, this year and provide even more service with respect to kidney dialysis patients. I just want to say this: This government has invested in health care, it's invested in the services that are needed in this province, and that's what health care restructuring is about.

There are some other areas I want to comment on as we deal with this resolution. It's not a situation, as the federal government's finance minister likes to say, of shovelling money into a bottomless pit. We're talking about health care. Health care is very important to Canadians and it's very important to Ontarians. It's a situation of there being a plan, which is in place, and for the money that is needed--not 11 cents on the dollar, which the federal government provides, but full and equal partnership that has to be played out by the federal government.

With respect to the primary care network, the Ontario government has been working hard for the past five years on reforms and innovations to the health system as we implement our vision for health care. The health action plan has been extended to primary care reform, and we have to recognize that here today, Ontario is a leader in primary care reform. We've been working in partnership with the Ontario Medical Association since 1995 on primary care initiatives. The Ministry of Health and Long-Term Care and the Ontario Medical Association first introduced primary care networks in four Ontario communities--Hamilton, Paris, Chatham and the Kingston area--in May 1998. In September 1999, primary care networks were introduced in three more communities: Ottawa, Parry Sound and Thunder Bay.

What are primary care networks? Primary care networks are made up of family doctors joining together in their communities to provide easier access to health care services and better coordination of health information through computers. The networks will help reduce waste and duplication in the health system. About 200 family doctors will participate in the primary care network pilot projects across seven communities, and nearly 400,000 Ontarians could eventually join or enrol with their family doctors as part of this new service model, which will provide 24-hour, seven-day access to care.

How it works is that patients agree that their family doctor and their doctor's primary care network will look after their primary health needs. Illness prevention, health education, diagnosis and treatment are all part of what family doctors do to provide their patients with health care. Primary care also includes family doctors making referrals to specialists. Referrals can also be made to another of the network's doctors who may have more expertise about the patient's condition. That's a tremendous initiative. It's something that is needed in this province.

I also want to comment on the pharmacare programs. We have not waited for the federal government to act in this area. The government of Ontario has been working for a number of years reforming and





enhancing Ontario drug programs. For example, Ontario's drug programs consist of three different plans tailored to different needs of the population: the Ontario drug benefit plan, the Trillium drug plan and the special drugs program.

The Ontario drug benefit plan is the largest, and covers the cost of over 3,100 prescription drugs. Some 1,018 products have been added to the Ontario drug plan since our government took office in 1995. The \$1.6-billion program covers about 2.2 million seniors and social assistance recipients. Forty-four million prescriptions were filled in 1998-99.

The government has a unique program, the Trillium drug program, for those who are not otherwise eligible for the Ontario drug plan and who have high drug costs. Approximately 100,000 Ontarians who need expensive drugs to treat serious illnesses like cancer, HIV and cystic fibrosis have their drugs paid for through this program. Expenditures for the Trillium drug program for 1998-99 totalled \$45.5 million, up from \$35 million the year before.

There is also a special drugs program which covers the full cost of certain expensive outpatient drugs such as specific drugs for AIDS, organ transplants, cystic fibrosis, schizophrenia and thalassemia. The program provides funding to over 12,000 beneficiaries at a cost of approximately \$92 million annually. So that is another one of our initiatives.

We're looking forward to more investment, more expansion of the programs with respect to home care and also with respect to long-term care. That is especially important to my area, the riding of Barrie-Simcoe-Bradford, because of the tremendous growth, the number of seniors who are moving to my area and the fact that there is a shortage in the city of Barrie with respect to long-term-care programs. That initiative, which was announced by the minister, is something we're looking forward to. The number of beds is 544 long-term-care beds. In the first go-round, the city of Barrie was given a little bit more than half of the 150 long-term-care beds. The second phase of it, I understand, will deal with 225 more long-term-care beds. When you're dealing with fast-growing areas and the initiatives that have been taken by this government, they have to be directed toward the services that are in need. As the MPP for the area, I put my focus on services that have to be there, like breast cancer screening for women, MRI technology, state-of-the-art technology that could only be gotten by my constituents in terms of advanced X-rays. The type of technology that is needed to be able to diagnose the most serious of illnesses is at RVH and also at York County Hospital. Kidney dialysis is something that has been wanted by my constituents for many years. Those initiatives are examples.

Cancer care is something we're going to be working hard on. A regional cancer care clinic for RVH is much needed. Certainly, because of the population dynamics of Simcoe county, RVH is ideally suited to be the regional cancer care clinic. With the growing population, I find many of my constituents who unfortunately are stricken with cancer have to go down to Sunnybrook hospital and get treatment, and go back and forth on the highway--a very difficult situation. When it gets fatal and they're in RVH, then the issue becomes whether they should be moving from RVH down to Sunnybrook hospital to get more treatment.

I'm in full endorsement of this resolution that has been put forth by the Premier. I believe in it 100%.

By my account, 12 hours and 45 minutes have now been spent on the debate surrounding this resolution. We have spent five sessional days debating this resolution. In comparison to debate on many other items, this is a significant amount of time. For example, the budget debate--

*Interjections.*

**The Acting Speaker:** Order. I cannot hear the member. Could we be quiet so that I can hear the member for Barrie-Simcoe-Bradford.

**Mr Tascona:** The members have debated this resolution long enough, and it is time we sent a strong message to the federal government. That is why I move that this question be now put.

**The Acting Speaker:** Mr Tascona has moved that the question be now put. Is it the pleasure of the



House that the motion carry?

All those in favour will say "aye."

All those opposed will say "nay."

In my opinion, the ayes have it.

Call in the members. It will be a 30-minute bell.

*The division bells rang from 1714 to 1744.*

**The Acting Speaker:** Order. Will members take their seats, please.

Mr Tascona has moved that the question now be put. All those in favour will stand.

### Ayes

Arnott, Ted	Guzzo, Garry J.	Runciman, Robert W.
Baird, John R.	Hardeman, Ernie	Sampson, Rob
Beaubien, Marcel	Harris, Michael D.	Spina, Joseph
Chudleigh, Ted	Johns, Helen	Sterling, Norman W.
Clement, Tony	Kells, Morley	Stewart, R. Gary
Coburn, Brian	Klees, Frank	Stockwell, Chris
Cunningham, Dianne	Maves, Bart	Tascona, Joseph N.
DeFaria, Carl	Mazzilli, Frank	Tilson, David
Dunlop, Garfield	Molinari, Tina R.	Turnbull, David
Ecker, Janet	Munro, Julia	Wettlaufer, Wayne
Elliott, Brenda	Murdoch, Bill	Wilson, Jim
Eves, Ernie L.	Mushinski, Marilyn	Witmer, Elizabeth
Galt, Doug	Newman, Dan	Wood, Bob
Gilchrist, Steve	O'Toole, John	Young, David
Gill, Raminder	Palladini, Al	

**The Acting Speaker:** All those opposed will stand one at a time.

### Nays





Agostino, Dominic	Gerretsen, John	Marchese, Rosario
Bartolucci, Rick	Gravelle, Michael	Martel, Shelley
Bountrogianni, Marie	Hampton, Howard	McLeod, Lyn
Boyer, Claudette	Kennedy, Gerard	Patten, Richard
Bryant, Michael	Kormos, Peter	Peters, Steve
Churley, Marilyn	Kwinter, Monte	Phillips, Gerry
Conway, Sean G.	Lalonde, Jean-Marc	Pupatello, Sandra
Cordiano, Joseph	Lankin, Frances	Ramsay, David
Curling, Alvin	Levac, David	Smitherman, George
Dombrowsky, Leona		

**Clerk of the House (Mr Claude L. DesRosiers):** The ayes are 44; the nays are 28.

**The Acting Speaker:** I declare the motion carried.

**Mrs Lyn McLeod (Thunder Bay-Atikokan):** On a point of order, Mr Speaker: I understand that the government's notice of closure has now cut off debate on the government's motion that was considered their priority before the House. I accept the vote that has just been taken, but I do ask to understand now what will happen to amendments. I have placed an amendment, as the New Democratic Party has. The amendment is considered to be in order and germane to the motion. In our view it would have made the motion considerably more balanced, because it would have recognized the Harris government's responsibility for the funding of health care. I'm asking whether or not the government's closure motion has now precluded having the government vote in support of their own extension of funding to health care.

**The Acting Speaker:** I would bring the member's attention to standing order 47, which spells it out quite clearly. I will just read the last sentence: "If a motion for closure is resolved in the affirmative, the original question shall be put forthwith and decided without amendment or debate."

The motion that the question be now put having passed, the next question is therefore on the main motion.

On April 4, Mr Harris moved:

"That the Legislative Assembly of the province of Ontario:

"(a) Condemns the government of Canada for cutting, by \$4.2 billion annually, base payments under the federal program that supports health care, the CHST, while provincial governments have increased health spending;

"(b) Urges the government of Canada to repudiate the statement attributed to a spokesperson for the federal finance minister, the Honourable Paul Martin, that increasing health funding would be 'just shovelling money into a hole that's going to open right back up again';

"(c) Urges the government of Canada immediately to restore permanently the health funding that it has cut, and to assume its fair share of increased, ongoing funding to meet the health needs of our country's aging and growing population; and





"(d) Reminds the federal health minister, the Honourable Allan Rock, that the sincerity of his commitment to medicare and the principles of the Canada Health Act would be best demonstrated not by idle rhetoric and vague words, but by restoring the health funding he has cut."

All those in favour of the motion will please say "aye."

All those opposed will please say "nay."

In my opinion, the ayes have it.

Call in the members.

Pursuant to standing order 28, the government has requested a deferred vote. The vote will take place during deferred votes in routine proceedings.

1750

#### TECHNICAL STANDARDS AND SAFETY ACT, 1999 / LOI DE 1999 SUR LES NORMES TECHNIQUES ET LA SÉCURITÉ

Mr O'Toole, on behalf of Mr Runciman, moved second reading of the following bill:

Bill 42, An Act to enhance public safety and to improve competitiveness by ensuring compliance with modernized technical standards in various industries / Projet de loi 42, Loi visant à accroître la sécurité publique et à améliorer la compétitivité en assurant l'observation de normes techniques modernisées dans plusieurs industries.

**Mr John Gerretsen (Kingston and the Islands):** On a point of order, Mr Speaker: It is now five minutes to 6 o'clock. This House normally rises at 6 o'clock, which in effect would give us five minutes to debate this extremely important bill.

I would ask you to use the powers that you have in the chair to rule this debate out of order, so that the government cannot utilize the five minutes that are still left in today's sitting as one day of debate on this motion. I ask you to utilize the powers that you have inherent within yourself to rule this calling of this order totally out of order.

**The Acting Speaker (Mr Michael A. Brown):** The government House leader.

**Hon Norman W. Sterling (Minister of Intergovernmental Affairs, Government House Leader):** Mr Speaker, our party is always interested in using the Legislative Assembly's time in an efficient and prudent manner. We are supposed to sit until 6 o'clock. That's why we called this bill.

I would say to my colleague across the floor that this does not count as a sessional day. It only counts as a sessional day if we debate the bill during the whole of the two and a half or three hours in the afternoon, so this will not count. We just thought it would be a good idea to start the debate on this bill and use the time of the Legislature in an efficient and prudent manner.

**Mr Rosario Marchese (Trinity-Spadina):** On a point of order, Mr Speaker.

**The Acting Speaker:** On the same point of order?

**Mr Marchese:** No.

**The Acting Speaker:** I've got to rule on the point of order that's before me.

In order for it to be a sessional day, this had to have been called as the first order of business of the day. It wasn't; therefore, it would not be counted.



**Mr Marchese:** On a point of order, Mr Speaker: I don't think there's a quorum. Would you please check?

**The Acting Speaker:** Check to see if there is a quorum.

**Clerk Assistant (Ms Deborah Deller):** A quorum is present, Speaker.

**The Acting Speaker:** The member for Durham.

**Mr John O'Toole (Durham):** I was becoming quite concerned that my views on Bill 42 would not be heard today, and people know that would be a personal offence.

I am pleased to support the Technical Standards and Safety Act and the potential benefits the bill contains for Ontario consumers. Bill 42 will provide better protection for Ontario consumers when riding ski lifts, elevators and escalators, and whenever they fill up their snowmobile gas tanks or propane barbeques this summer. This legislation unites the province's seven technical standards laws into a consolidated piece of legislation. Clearly, this streamlines and improves customer service, which is the interest of this government, to make Ontario a better place to live, to work, to invest, to raise a family and to grow corn.

Included in the regulations would be the details and technical standards affecting such things as the operation of boilers and pressure vessels that heat and cool Ontario's office buildings, schools, hospitals and factories, to name but three.

The safe use of more than 39,000 elevators, escalators and construction hoists are also in this legislation, and the work of ensuring that stuffed articles, from mattresses to your winter coat, meet Ontario safety standards. As winter has just passed, we don't need the coats any longer, but we still have to check to make sure they're safe, and there are mattresses that have to be checked to see if they're stuffed.

**Interjection:** Don't pull that tag off.

**Mr O'Toole:** Don't ever remove that tag, I caution you, because the mattress could deflate immediately.

The safe use and storage of hydrocarbon fuels and the safety of amusement devices are just a few of the many safety aspects that our minister, Mr Runciman, has laboured over in this legislation to ensure the safety of all consumers in Ontario.

**Mr Peter Kormos (Niagara Centre):** Mr Speaker, on a point of order: I would ask the Speaker to note that it is 6 of the clock according to my watch, and the House should be recessing.

**The Acting Speaker:** The member for Durham.

**Mr O'Toole:** These tedious interruptions will be duly noted, I'm sure, by the table.

This legislation is intended to pave the way for businesses in technical industries in this province to continue with the very high standards they have achieved to date.

Ontario is seen as the leader in technical safety across North America, and this government is committed to building on that reputation by ensuring that Ontario can meet the technical and safety challenges in the new century.

The Minister of Consumer and Commercial Relations has worked together with the Technical Standards and Safety Authority, this province's technical safety watchdog and the not-for-profit organization responsible for administering the statutes, to develop this bill. They reviewed this legislation thoroughly, and we found that a new consolidated legislative framework was necessary to keep Ontario at the forefront of technical safety in this province and indeed in North America.

Amalgamating the seven provincial technical standards acts into one uniform piece of legislation will





allow technical industries to make improvements in safety equipment as quickly as new technologies become available. Just think of the efficiency for small business in this proposed piece of legislation. It's common sense. I urge members of the public who may be viewing this to get a copy of this bill and follow through with the important changes that are taking place.

In the area of fuel safety, elevators, pressure vessels and amusement devices, technological advances that could improve safety are being made every day. It is our goal to ensure that those new advances are available to help the people of this province.

I ask for your support of this important legislation. In my riding of Durham, small business and people in the construction industry will be happy that Minister Runciman and this government have moved this important initiative. I urge all members to take a very close look before you criticize an act that helps us to be better and more competitive in the province of Ontario. I have the confidence of this caucus that we--

**The Acting Speaker:** Thank you. It being 6 of the clock, this House stands adjourned until 1:30 of the clock tomorrow afternoon.

*The House adjourned at 1758.*



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# Ontario Hansard

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1st session, 37th Parliament | 1<sup>re</sup> session, 37<sup>e</sup> législature

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